DOCUMENT RESUME

ED 441 599 PS 028 608

AUTHOR	Kimbrell, Joe, Ed.; Daly, Maureen, Ed.; Sterne, Sylvia, Ed.; Howard, Sharon, Ed.; Evans, Trina, Ed.; Lowenthal, Nancy, Ed.; Galatas, Kate, Ed.; Sumrall, Liz, Ed.
TITLE	Louisiana Adolescent Data Book.
INSTITUTION	Louisiana State Office of Public Health, New Orleans. Dept. of Health and Hospitals.
PUB DATE	1999-06-00
NOTE	130p.
PUB TYPE	Numerical/Quantitative Data (110) -- Reports - Descriptive (141)
EDRS PRICE	MF01/PC06 Plus Postage.
DESCRIPTORS	Academic Achievement; Adolescent Behavior; *Adolescent Development; *Adolescents; Child Abuse; *Child Health; Child Neglect; Communicable Diseases; Comprehensive School Health Education; Crime; Depression (Psychology); Elementary Secondary Education; Foster Care; *Health Promotion; Homeless People; Incidence; Mental Health; Poverty; Program Descriptions; School Health Services; Sexual Abuse; State Programs; Tables (Data); Unemployment; Violence; *Well Being; Youth Problems
IDENTIFIERS	*Louisiana; Risk Taking

ABSTRACT

This report provides a comprehensive review of the status of Louisiana's youth and is designed to be used in planning efforts and in developing priorities for improving the health and welfare of the youth of the state. Chapter 1 of the report examines the concept of expanding the definition of health to include social and emotional development, considers the relationship of high-risk behaviors to health, and identifies 40 developmental assets that predict behavior. Chapter 2 provides brief synopses of current state programs for adolescents. Chapter 3 highlights the connection between poverty and health, and provides the number of children in each parish receiving Temporary Assistance to Needy Families, and statistics on foster care, unemployment, and employment status by parish. Chapter 4 considers the relationship between health and academic performance. Chapter 5 discusses the mental health issues facing adolescents; provides information on the symptoms of depression; details the number of validated cases of neglect, sexual, and physical abuse in the state; and provides information about incarcerated youth. Chapter 6 contains information on homeless youth and discusses program eligibility. Chapter 7 summarizes results of the 1997 Louisiana Youth Risk Behavior Survey that examined the prevalence of health risk behaviors, including substance abuse, tobacco, gambling, and injuries; and provides information on HIV/AIDS, sexually transmitted diseases, and teen pregnancy. Chapter 8 covers a variety of infectious diseases facing teens, including hepatitis B, tuberculosis, and dental disease. Appended are figures relevant to each chapter and a comprehensive list of Web sites where additional information can be obtained. (KB)

Reproductions supplied by EDRS are the best that can be made
from the original document.

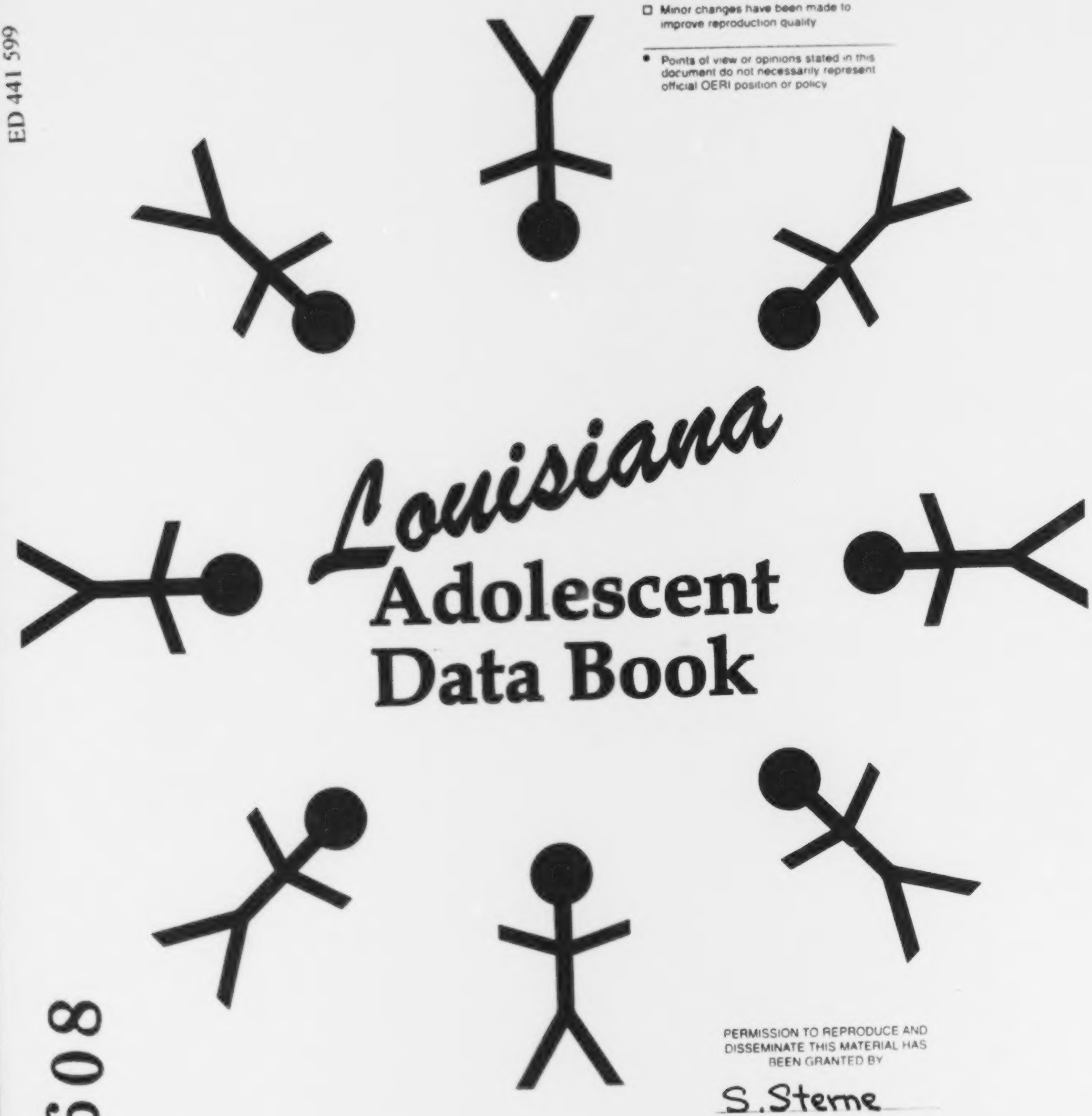
ED 441 599

U.S. DEPARTMENT OF EDUCATION
Office of Educational Research and Improvement
EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

☒ This document has been reproduced as received from the person or organization originating it.

☐ Minor changes have been made to improve reproduction quality.

- Points of view or opinions stated in this document do not necessarily represent official OERI position or policy.



Louisiana Adolescent Data Book

PERMISSION TO REPRODUCE AND DISSEMINATE THIS MATERIAL HAS BEEN GRANTED BY

S. Sterne

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

Louisiana Department of Health and Hospitals
Office of Public Health

BEST COPY AVAILABLE

PS 028608

Louisiana Adolescent Data Book

Louisiana Department of Health & Hospitals
Office of Public Health

June, 1999

Three Thousand copies of this public document were printed at a cost of $11,300.00. This document was published for the Louisiana Office of Public Health, Department of Health and Hospitals, by the Louisiana State University Medical Center, Auxiliary Enterprises, Duplicating, Printing, and Graphics, 1542 Room 109E, Tulane Ave., New Orleans, Louisiana 70112. This material was printed to provide information about the status of adolescents in Louisiana and in accordance with the standards for printing by State Agencies established pursuant to R.S. 43:31. For more information about this project, contact the Adolescent Health Initiative at (504) 568-6636.

BEST COPY AVAILABLE

Louisiana Department of Health and Hospitals
Office of Public Health

Secretary
David W. Hood

Assistant Secretary
Jimmy Guidry, MD

Deputy Assistant Secretary
Joseph D. Kimbrell, MA, BCSW

Maternal and Child Health Administrator
Joan Wightkin, MPH

Family Planning Program Manager
Sharon Howard, MSW

Adolescent School Health Initiative Director
Sylvia Sterne, MA

Adolescent Health Initiative
Trina Evans, MPH

Publication Consultants
Helena Albertin, MPH
Adolescent School Health Initiative
Tulane School of Public Health & Tropical Medicine

Craig Mills, MA, CHES
Southeastern Louisiana University
Excellence in Health & Education Project

Natasha Sakolsky, MPH

4

Table of Contents

Preface .v
Acknowledgments .vi
Executive Summary .vii
Introduction .x

Chapter One: Toward a Broader View of Health

Expanding the definition of health .2
Adolescent development .4
Population figures .5
Search Institute 40 developmental assets .6

Chapter Two: Working Together to Improve Adolescent Health in Louisiana

1. Louisiana Adolescent Health Initiative .10
2. Louisiana Healthy Communities Resource Center .11
3. Louisiana Adolescent School Health Initiative .12
4. Louisiana SAFE KIDS Coalition .13
5. Synar Initiative .13
6. Violence Prevention Program .14
7. Urban Youth Against Violence .14
8. Louisiana's Child Health Insurance Program (LaCHIP) .14
9. Keeping It R.E.A.L. .15
10. Teen Institute .15
11. Louisiana Youth Health Congress .16
12. Louisiana Governor's Council on Physical Fitness and Sports .16

Chapter Three: Economic Status

Poverty and social welfare .18
Family composition .19
Employment .20

Chapter Four: Educational Status

Education & school .24
After school hours .27
School-based health centers .27
Standardized testing .27
Louisiana School-based health center sites .28

Chapter Five: Mental Health, Crime & Violence

Mental health 30
Access to Office of Mental Health Services 31
More information about mental health for children and adolescents 32
Violence and crime 33

Chapter Six: Homeless Adolescents

Homelessness-defined; Education programs - Who is eligible? 38
What can we do to help homeless people? 41
Activities for school districts to address the needs of homeless and highly-mobile families 41
Runaway, homeless and street youth 42

Chapter Seven: Risk Behaviors

1997 Louisiana Youth Risk Behavior Survey 44
Alcohol, drug, tobacco use & gambling 45
  Substance abuse 45
  Tobacco 45
  Gambling 46
Nutrition and exercise 48
Injury 49
HIV/AIDS 49
Sexually transmitted diseases 50
Teenage pregnancy 51

Chapter Eight: Infectious Diseases

Hepatitis B 56
Tuberculosis 56
Dental diseases 57

Appendix A

Charts and figures A1

Appendix B

Useful resources B1

STATE OF LOUISIANA
DEPARTMENT OF HEALTH AND HOSPITALS

M. J. "Mike" Foster, Jr.
GOVERNOR

LOUISIANA
Department of HEALTH and HOSPITALS

David W. Hood
SECRETARY

June 18, 1999

Dear Citizens of Louisiana:

The attached 1998-1999 Louisiana Adolescent Data Book represents the first issue of such a publication for our state. It provides a comprehensive review of the status of Louisiana's youth by compiling information on the teen and adolescent population from several sources into one document. It is envisioned that this unique document will assist decision makers, agencies, and individuals to better plan for the future of Louisiana's young people.

Many of the behavior choices and decisions that our young people and those around them make are reflected in this informative document. The information presented encourages us, as concerned citizens, to focus on issues that can affect our youth for their entire lifetime. We as decision makers welcome this opportunity.

Several public and private agencies have collaborated and contributed to the development of this publication; among them are the Departments of Corrections and Public Safety, Social Services, Education, and Labor, as well as the Agenda for Children. The resources provided by the above agencies were integrated and organized by the Adolescent Health Program of the Department of Health and Hospitals Office of Public Health. I commend all involved for the effort that was put forth to make this publication and the knowledge it imparts a reality.

We hope that you find the 1999 Louisiana Adolescent Data Book informative and useful in your planning efforts and in prioritizing resources to improve the health and welfare of the youth of Louisiana.

Sincerely,

David W Hood

David W. Hood
Secretary

OFFICE OF THE SECRETARY
1201 CAPITOL ACCESS ROAD • P. O. BOX 629 • BATON ROUGE, LOUISIANA 70821-0629
PHONE # 225/342-9509 • FAX # 225/342-5568
"AN EQUAL OPPORTUNITY EMPLOYER"

Acknowledgments

The development of this inaugural edition of the Louisiana Adolescent Data Book was made possible by the dedication and willingness of those people, in both the public and private sectors, who have a vested interest in the quality of life of the adolescent population and in essence, the future of Louisiana. This data book was a joint endeavor of the Adolescent Health Initiative and the Adolescent School Health Initiative, of the Louisiana Department of Health and Hospitals' Office of Public Health. Other collaborating agencies include the Department of Health and Hospitals' Office of Mental Health; the Department of Education's Bureau of School Accountability, Louisiana LEARN for the 21st Century, Division of School & Community Support, Nutrition Education Training, Education for Homeless Children & Youth and the School Food Service Program; the Department of Labor; the Department of Social Services' Office of Community Services and Office of Family Services; the Department of Correction's Office of Youth Development and the Office of Public Health's Center for Health Statistics, Oral Health Program, Injury Research & Prevention Program, Maternal & Child Health, Vital Records, Governor's Council on Physical Fitness & Sports and Policy, Planning & Evaluation Section. Additional contributions were made by LSU Medical Center - Shreveport, LSU Medical Center - New Orleans, Southeastern Louisiana University, and Agenda for Children.

Special thanks needs to be given to those individuals whose time and efforts were used in editing and contributing to the final version of this document, including: Joe Kimbrell, Dr. Maureen Daly, Sylvia Sterne, Sharon Howard, Trina Evans, Nancy Lowenthal, Kate Galatas and Liz Sumrall. We would like to give special recognition to Joan Borstell, Center for Health Statistics; Shannon Johnson, Agenda for Children; and Susan Kochan, Department of Education for their efforts in helping us gather this vital information.

Additional thanks to those who are equally vested and gave of their time and services, including: Cynthia McAllister, Hakam Khashoggi, Dr. Denese Shervington, Judy Watts, Tracie Wright, Dr. Jim Sutherland, Anna Simon, Nuruddin Jooma, Betsy Gleckler, Wanda Jaskiewicz, Kristin Nelson, Jamie Van Leeuwen, Elissa Leopold, Laura Pease, Giesle Hall, Sue Steib, Joan Pitman, Pat Williams, Bobby Palmer, Christine Romalowski, Teena Freeman, Patricia Hosemann, Dr. Tom Farley, Adolf Voigt, Dr. Jill Rush, Dr. Millie Naquin, Dr. Jeanne Burns, Ken Fortenberry, George White, Rudy Macklin, Kerry Chausmer, Alice Carroll, Luke Chiniche and Rafeal Jarpa.

Helena Albertin
Craig Mills
Natasha Sakolsky

Adolescent Data Book
Executive Summary

"Adolescent health is influenced not only by the strengths and vulnerabilities of individual adolescents but also by the character of the settings in which they lead their lives. [Their] health is influenced by connections to family, friends, and school, and by the characteristics of the community in which the teen resides."

-Protecting Adolescents from Harm:
Findings from the National Longitudinal
Study on Adolescent Health[1]

This first issue of the Louisiana Adolescent Health Data Book is intended not to simply enumerate statistics, but rather to provide a frame of reference for interpreting these statistics within a social, economic and environmental context relevant to Louisiana. The main threats to adolescent health and well being are the risky behaviors they engage in and the choices they make. Likewise, adolescents who report positive values and identity and have strong social support from their parents, schools and communities are less likely to engage in these risky behaviors.

High-Risk Behaviors Among Louisiana Teens

Substance Abuse
38% of high school students reported that they have smoked, 34% reported drinking 5 or more drinks of alcohol in a row, and 24% admit having used marijuana in the past.[2]

Sexual Behavior
There were 14,749 pregnancies and 12,225 live births among 15- to 19-year-old girls in 1997; and 15 to19-year olds have the highest rates of gonorrhea in the state.

Delinquency
Nearly 13 out of every 1000 children are juvenile offenders.[3] Louisiana ranks 39th among states in juvenile violent crime arrest rate.[4]

Violence
7% of high school students have carried a weapon on school property.[2] Louisiana ranks 43rd in teen violent death rate.[4]

Depression
10% of high school students have attempted suicide in the past 12 months, and 22% have seriously contemplated it.[2] At least 37 out of every 1000 children are homeless.[5]

School Failure
13% of teens are high school dropouts.[4]

There are common ***root causes*** of adolescent high-risk behaviors that include:

- **Stress**
- **Depression**
- **Hopelessness**
- **Emptiness**
- **Fear**
- **Anger**
- **Poverty**
- **Environmental Factors**

Programs for adolescents need to address these root causes. Successful programs have shared elements.

Elements for Successful Programs to Address Adolescent Risk Behaviors[6]

* Early intervention
* Multi-agency, multi-component programs
* Broad community support and collaboration
* Parental involvement
* Enhancement of educational achievement
* Culturally appropriate, recognizing family and community values
* Youth involvement in program design, implementation, and evaluation
* Adequate program model replication

We all have a role to play in creating safe, nurturing environments for our youth where their emotional, social and physical health can be fostered, and where they can grow to be successful adults. At the heart of this book is a hope that community, state and local institutions, and other resources will be inspired to join efforts to address the fundamental issues surrounding adolescent development. In isolation, we can not succeed.

Chapter One, Toward a Broader View of Health, examines the concept of expanding the definition of health to include social and emotional well being. The reader is provided with a brief review of adolescent physiological and emotional development. High-risk behaviors, choices, their determinants and their relationship to health are considered. The Search Institute's 40 developmental assets that predict behavior are included. Population estimates for 1996 by race and gender are also provided.

Chapter Two, Working Together to Improve Adolescent Health in Louisiana, provides a brief synopses of current programs for adolescents within the Offices of Public Health, Alcohol and Drug Abuse, and Mental Health, and the Department of Social Services. It highlights two additional programs for youth: the Urban Youth Against Violence Program and the Louisiana Youth Health Congress.

Chapter Three, Economic Status, highlights the connection between poverty and health. The number of children in each parish receiving Temporary Assistance to Needy Families (TANF) is provided. In addition, statistics on foster care, unemployment and employment status by parish are included.

Chapter Four, Educational Status, considers the relationship between health and academics. School-based health centers are highlighted. Student counts by parish and ethnicity are listed for both public and non-public schools. In addition, numbers of registered gifted and talented students and disabled students are included. The chapter lists the pupil expenditure by parish in Louisiana public schools.

Chapter Five, Mental Health, Crime & Violence, begins with a discussion of mental health issues facing adolescents and provides information on the symptoms of depression. Information regarding the Office of Mental Health is provided, including a list of each regional child program coordinator. Violence and crime are also addressed in this chapter. Graphs in this chapter include: mental health services delivered by community mental health centers; number of validated cases of neglect, sexual and physical abuse in the state; and information about incarcerated Louisiana youth.

Chapter Six, Homeless Adolescents, begins by defining "homelessness." It includes information on who is eligible for educational services through the Louisiana Department of Education Homeless Program. Numbers of homeless students enrolled in Louisiana public schools by parish are provided.

Chapter Seven, Risk Behaviors, summarizes the results of the 1997 Louisiana Youth Risk Behavior Survey that examines the prevalence of health risk behaviors among Louisiana adolescents. Substance abuse, tobacco, gambling and injuries are all considered. Information on HIV/AIDS and sexually transmitted diseases is provided. The complexity of teen pregnancy is explored. The importance of proper nutrition and exercise is also examined.

Chapter Eight, Infectious Diseases, covers a variety of infectious diseases facing teens including hepatitis B, tuberculosis and dental disease. Graphs of numbers of reported cases among youth of these various infectious diseases are provided.

Appendix A, List of Figures, includes figures relevant to each chapter that are referenced throughout the data book.

Appendix B, Useful Resources, provides a comprehensive list of web sites where additional information can be obtained. It also includes a list of national organizations that address adolescent issues.

---

[1] Blum RW, Rinehart PM. *Reducing the risk: connections that make a difference in the lives of youth.* Division of General Pediatrics and Adolescent Health, University of Minnesota, 1997.

[2] Louisiana Youth Risk Behavior Survey, 1997.

[3] Department of Public Safety and Corrections/Office of Youth Development, 1997.

[4] National Kids Count Data Book, 1998.

[5] Chiniche, L. (1997) *Homelessness - Defined: Education Programs - Who is Eligible?* Louisiana Department of Education Homeless Program. Adopted from Donna Bolt, Oregon Homeless Education Coordinator.

[6] Source: *The Briefing Book for LA Legislators.* Partnership to Prevent Adolescent Pregnancy, Southern Regional Project on Infant Mortality and the Child Welfare League of America. October, 1996.

Louisiana Adolescent Data Book

The *Louisiana Adolescent Data Book* is the result of the collaborative effort of the Departments of Social Services, Education, Labor and Corrections, as well as the Department of Health and Hospital's Offices of Mental Health, Alcohol and Drug Abuse and the many Office of Public Health (OPH) programs that are all committed to improving the health and lives of our Louisiana adolescents.

DHH-OPH's commitment to adolescent health is reflected in the many adolescent initiatives and activities in which OPH has made an investment. In 1990, OPH conducted a study which concluded that the causes of adolescent deaths and illnesses could be reduced or prevented through greater adolescent health education and improved access to health care and professional counseling. Therefore, in 1991, the Louisiana State Legislature created the *Adolescent School Health Initiative (ASHI)* to facilitate the development of comprehensive health centers in public, middle and senior high schools.

There was a strong desire among policy makers and leaders at OPH to do more to address the complex social, emotional and medical needs of this underserved population. Therefore, in 1995, the *Louisiana Adolescent Health Initiative (AHI)* was created. The mission of AHI is to improve the health status of adolescents in Louisiana by facilitating a collaborative, multi-disciplinary approach to adolescent health care, disease prevention and health promotion in the state.

In 1996, AHI produced *Teen Talk: Report of the 1996 Louisiana Youth Focus Groups*. This report provides an adolescent perspective on health and social issues that affect adolescents and their communities across the state. It cites adolescent-generated solutions to problems such as teenage pregnancy, violence and gangs, HIV transmission, poverty, substance abuse and injury due to firearm use.

Now, in 1999, the publication of this data book came as the result of the collaborative effort of many of the OPH programs, including Family Planning – Adolescent Health Initiative, Adolescent and School Health Initiative, Maternal and Child Health, Injury Research and Prevention Program, Communicable Disease Control, and Healthy Communities. Also, there were many contributions from other state agencies that have made this rich document a reality.

We hope that the *Louisiana Adolescent Data Book (LADB)* will be a useful resource for planners and policy makers, state and local officials, grant writers, teachers, community leaders, activists, parents and all others who are working to improve the health of our Louisiana youth.

For more information and copies of the Data Book, please contact:

Trina Evans
Coordinator, Adolescent Health Initiative
Office of Public Health
P. O. Box 60630
New Orleans, LA 70160
(504) 568-6636

Chapter One

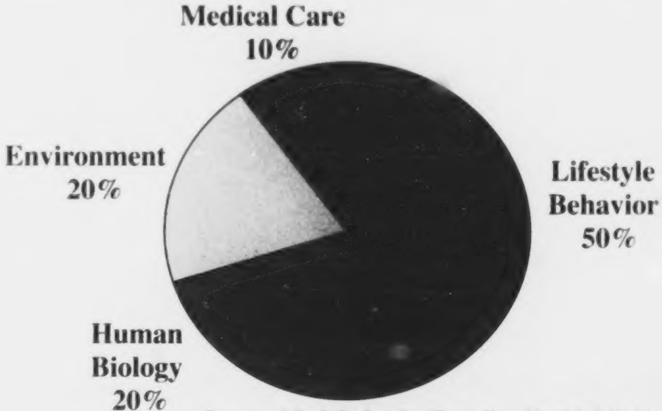
Toward a Broader View of Health

Expanding the Definition of Health – 1999

As we look at the many factors that affect the health and well being of adolescents, and the population as a whole, we see that emphasis has traditionally been placed on the provision of medical care. However, it has been shown that preventing disease and disability and promoting healthy lifestyles have greater impact on health status.

Furthermore, when you consider some of the research done by Mark Lelonde of the Canadian Health Ministry, you will note that medical care accounts for only about 10 percent of the factors influencing health status, while the environment and lifestyle behaviors are attributed with 70%. This reinforces the need for more of a focus on prevention; however, this will be no easy task. As of 1990, the national investment in prevention was only about 5% of the total annual health care cost.[7]

Health Field Conceptual Model
Influence Factors on Health Status



Source: Mark Lelonde, Canadian Health Ministry

This information leads us to the discussion on how we define "health." The World Health Organization defines health as "... a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity." Current trends in public health are moving us towards this broader definition of health. We must move beyond the traditional way of defining health and start including in this an understanding and appreciation for the influences that other areas have on a person's health status. For example, economics, transportation, employment, education, psychosocial health, access to primary health care and other factors are definite indicators of overall health and well being.

The impact of psychosocial factors on health has become more evident as diseases have become treatable and preventable through immunizations, antibiotics and other advances in healthcare. Health professionals have long recognized that psychological and social factors are important contributors to the health and well being of children, youth and their families. It is now understood that if children are to grow up to be healthy, socially competent adults, certain fundamental needs must be met. The essential ingredients cut across culture and class and include safety, basic health, a sense of worth, durable human relationships and trust in others.

Numerous reports document the health status of adolescents and conclude that the main threats to adolescent health are predominantly the risky behaviors they engage in and the lifestyle choices they make. High-risk behaviors that are associated with the leading causes of death include: tobacco use, poor dietary patterns, physical inactivity, alcohol and drug use, high-risk sexual behaviors, and behaviors associated with intentional/unintentional injuries.

The Centers for Disease Control and Prevention (CDC) notes that these high-risk behaviors are usually established early in life and carried into adulthood; are inter-related; are associated with poor health, education and social well being; and are preventable.

These risk behaviors and lifestyle choices are associated with other factors, factors that can be viewed as root causes. Some examples of root causes that influence behavior and, consequently, adolescent health status include: stress, depression, fear, anger, hopelessness, emptiness, poverty and environmental factors.

Seminal research on protecting adolescents from harm was published in *The Journal of the American Medical Association* in September of 1997. The authors state:

> "Some children who are at high risk for health-compromising behaviors successfully negotiate adolescence, avoiding the behaviors that predispose them to negative health outcomes; while others, relatively advantaged socially and economically, sustain significant morbidity as a consequence of their behaviors. These issues of vulnerability and resilience have stimulated an interest in the identification of protective factors in the lives of young people – factors that, if present, diminish the likelihood of negative health and social outcomes. Of the constellation of forces that influence adolescent health-risk behavior, the most fundamental are the social contexts in which adolescents are embedded; the family and school contexts are among the most critical. Yet, how adolescents' connections to these contexts shape their health-risk behaviors is poorly understood."[8]

Their analysis of findings from the *National Longitudinal Study of Adolescent Health* seeks to identify risk and protective factors at the school, family and individual levels as they relate to four broad domains critical to adolescent health: emotional health, violence, substance use/abuse and sexuality. The authors found consistent evidence that caring and connectedness to others are important in understanding the health of young people today. The findings represent the first time certain protective factors have been shown to apply across the major risk domains. Among the protective factors are: caring, love and warmth of parents; time availability of parents; caring of teachers; parental expectations regarding student performance; and religion and prayer.

Risk factors include job demands, after-school hours and the associated adverse consequences of fatigue; low grade-point average; being retained in school; old for grade; and perceiving oneself as physically older than classmates.

The Search Institute in Minneapolis, Minnesota, has conducted research across the country to identify the developmental assets that predict both high-risk and positive behaviors and attitudes of children and youth. The new approach to asset building starts with the question, "What do young people need to navigate successfully through adolescence?"

Developmental assets (see page 6 for a list of the 40 Developmental Assets) are a set of essential building blocks that all young people need. The more assets young people experience or possess, the less likely they are to engage in a wide range of risky behaviors and the more likely they are to engage in positive behaviors. The more assets they acquire, the more likely they are to live productive and healthy lives. In this way, they contribute positively to the economic and social well being of the state, rather than drain the state's resources through remedial programs, incarceration, hospitalization and institutionalization.

We have made great progress in Louisiana by compiling data on the broad domains critical to adolescent health in one document for the first time. Using information contained here challenges readers to assess the developmental assets of our youth, rather than focus on problem issues as an approach to reduce or control "risky behavior" through intervention programs and legislation.

It is our hope that this document will be used by members of all branches of local and state governments, as well as by the hundreds of local and state private entities that address the needs of Louisiana's children and youth. The LADB can serve as a springboard to re-thinking plans and programs for youth based on their resiliency and potential for positive contributions to society.

Adolescent Development

> *"It was the best of times, it was the worst of times."*
>
> Charles Dickens

Adolescence is the developmental stage between childhood and adulthood. It is a period marked by transition and is often a tumultuous time for adolescents and their families. Prevailing questions of the period are, *"Who am I?"* and *"Am I normal?"* Adolescents navigate the waters of physiological, emotional, cognitive and behavioral development in an effort to answer these questions, to achieve maturity and to gain independence.

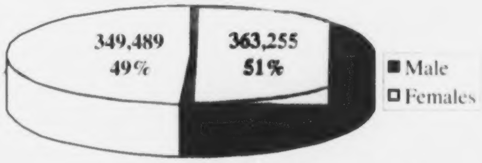
Although we are defining adolescence as the period between ages 10 and 19 years, when exactly adolescence begins and when it ends varies according to each individual. Girls, however, do develop about two years before their male counterparts.[9] Changes associated with the onset of adolescence and the process of adolescent development include:

- Significant changes in body size and shape
- Growth of body hair
- Maturation of reproductive organs
- Occurrence of rapid hormonal changes
- Clarification of values and belief systems
- Growth of intellectual capacity, increased awareness and insight[10]

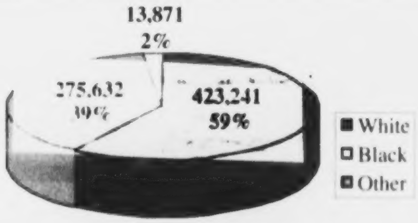
Adolescence is thought to end after the teenage years, when most adolescents have: 1) formed an internal self-identity and set of personal goals, while simultaneously recognizing their external social environments; 2) reached a level of emotional maturity; 3) gained economic independence from families or care providers; 4) acquired skills necessary to achieve personal and professional goals; and 5) developed mature relationships, including love and sexual relationships. Patterns that determine the course of this development are set during infancy and childhood.[11] It is for this reason that we must address the whole of the adolescent when addressing adolescent health needs. It is also the reason we must reach children and their families early in life if we are to effectively prevent the onset of unhealthy or life threatening risk behaviors during adolescence.

During adolescence, teenagers are particularly vulnerable to low self-esteem and self-hate, jealousy, anger, depression, suicidal ideation, boredom, shyness and stress.[12] Many factors collectively contribute to the onset of adolescent risk behaviors, including: peer pressure and a desire to "fit in"; blatant and subliminal media imagery; seductive advertising messages; sexist and racial social values that reward thinness, light complexions and consumerism; child and sexual abuse; poverty and an unhealthy environment; and inadequate recreational opportunities for adolescents.

According to the 1998 KIDS COUNT DATA BOOK of the Annie E. Casey Foundation, Louisiana ranks 50th among all states in overall child well-being. In recent years, Louisiana has taken a new approach to responding to the physical and psychosocial health needs of adolescents. The Louisiana AHI, Healthy Communities Resource Center, ASHI, Louisiana SAFE KIDS Coalition, Violence Prevention Program, Synar Initiative, Teen Institute, Keeping It R.E.A.L., Urban Youth Against Violence, Louisiana Youth Health Congress and Louisiana Governor's Council on Physical Fitness and Sports all work to this end. The following figures show population estimates for 1996 by gender and race.



Percent of Youth by Gender
Total Age 10 - 19 years old

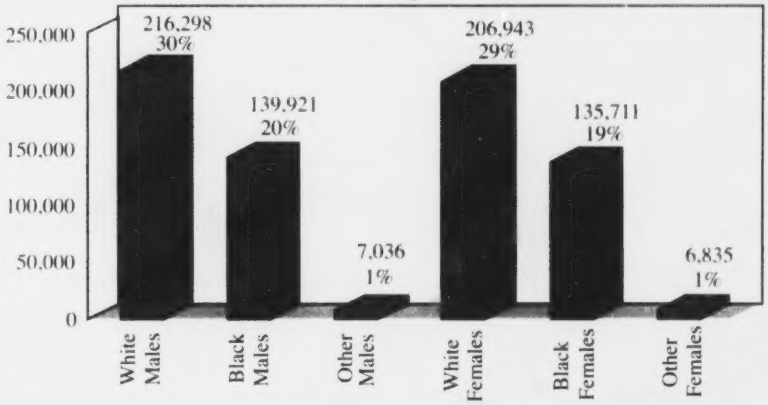


Total of Youth by Race
Total Age 10-19 years old

Youth ages 10-19 represent 16% (n=712,744) of the state's population. 51% of youth are male and 49% are female. The majority of youth are white (59%), 39% are black and 2% are other populations (Latino, Asian or other). See Appendix pages A3-A8 for detailed information on parish specific population estimates by gender and race.

1996 State Population Estimate
4,468,000
State Population Age 10-19 years
712,744

Percent of Youth by Gender and Race



---

[7] McGinnis and Foege, Actual Causes of Death in the United States, *JAMA*, 11/10/93-Vol 270, no. 18:2207-2212.

[8] Resnick, Bearman, Blum, Bauman, Harris, Jones, Tabor, Beuhring, Sieving, Shew, Ireland, Bearinger, and Udry, Protecting Adolescents From Harm: Findings From the National Longitudinal Study of Adolescent Health, *JAMA*, 9/10/97 Vol 278, no. 10:823-832.

[9] Lewis, Melvin. Clinical Aspects of Child Development: An Introductory Synthesis of Developmental Concepts and Clinical Experience, Lea and Febiger, Philadelphia, 1982.

[10] Ibid., 1982.

[11] Langs, Robert. The Technique of Psychoanalytic Psychotherapy, Jason Aronson, Inc., New York, 1973.

[12] McCoy, Kathy and Wibbelsman, Charles. The Teenage Body Book, Pocket Books, New York, 1984.

BEST COPY AVAILABLE

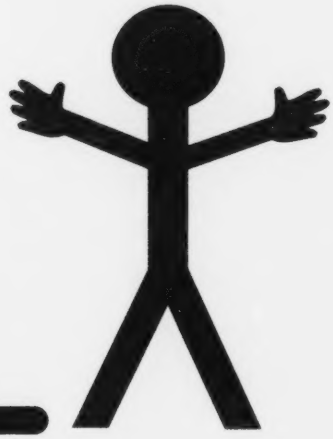
Search Institute 40 Developmental Assets

External Assets	Asset Name and Definition	
Support	Family support	Family life provides high levels of love and support.
	Positive family communication	Young person and her or his parent(s) communicate positively, and young person is willing to seek parent(s') advice and counsel.
	Other adult relationships	Young person receives support from three or more nonparent adults.
	Caring neighborhood	Young person experiences caring neighbors.
	Caring school climate	School provides a caring, encouraging environment.
	Parent involvement in schooling	Parent(s) are actively involved in helping young person succeed in school.
Empowerment	Community values youth	Young person perceives that adults in the community value youth.
	Youth as resources	Young people are given useful roles in the community.
	Service to others	Young person serves in the community one hour or more per week.
	Safety	Young person feels safe at home, in school, and in the neighborhood.
Boundaries and Expectations	Family boundaries	Family has clear rules and consequences, and monitors the young person's whereabouts.
	School boundaries	School provides clear rules and consequences.
	Neighborhood boundaries	Neighbors take responsibility for monitoring young people's behaviors.
	Adult role models	Parent(s) and other adults model positive, responsible behavior.
	Positive peer influence	Young person's best friends model responsible behavior.
	High expectations	Both parent(s) and teachers encourage the young person to do well. .
Constructive Use of Time	Creative activities	Young person spends three or more hours per week in lessons or practice in music, theater, or other arts.
	Youth programs	Young person spends three or more hours per week in sports, clubs, or organizations at school and or in community organizations.
	Religious community	Young person spends one or more hours per week in activities in a religious institution.
	Time at home	Young person is out with friends "with nothing special to do" two or fewer nights per week.

Internal Assets	**Asset Name and Definition**	
Commitment to Learning	Achievement motivation	Young person is motivated to do well in school.
	School engagement	Young person is actively engaged in learning.
	Homework	Young person reports doing at least one hour of homework every school day.
	Bonding to school	Young person cares about his or her school.
	Reading for pleasure	Young person reads for pleasure three or more hours per week.
Positive Values	Caring	Young person places high value on helping other people.
	Equality and social justice	Young person places high value on promoting equality and reducing hunger and poverty.
	Integrity	Young person acts on convictions and stands up for her or his beliefs.
	Honesty	Young person "tells the truth even when it is not easy."
	Responsibility	Young person accepts and takes personal responsibility.
	Restraint	Young person believes it is important not to be sexually active or to use alcohol or other drugs.
Social Competencies	Planning and decision-making	Young person knows how to plan ahead and make choices.
	Interpersonal competence	Young person has empathy, sensitivity and friendship skills.
	Cultural competence	Young person has knowledge of and comfort with people of different cultural racial ethnic backgrounds.
	Resistance skills	Young person can resist negative peer pressure and dangerous situations.
	Peaceful conflict resolution	Young person seeks to resolve conflict non-violently.
Positive Identity	Personal power	Young person feels he or she has control over "things that happen to me."
	Self-esteem	Young person reports having a high self-esteem.
	Sense of purpose	Young person reports that "my life has a purpose."
	Positive view of personal future	Young person is optimistic about her or his personal future.

Copyright © 1997 by Search Institute. All rights reserved. This chart may be reproduced for educational, noncommercial use only with this copyright line. No other use is permitted without prior permission from Search Institute, 700 S. Third Street, Suite 210, Minneapolis, MN 55415; 800-888-7828. This list is an educational tool. It is not intended to be nor is it appropriate as a scientific measure of the development assets of individuals.

Chapter Two



Working Together to Improve Adolescent Health in Louisiana

Working Together to Improve Adolescent Health in Louisiana

Louisiana Adolescent Health Initiative (AHI)

Adolescents face a myriad of socially related threats that adversely effect their health. In order to have an impact on the health of adolescents, multi-faceted solutions must be implemented to combat these threats, and everyone must work together as a team!

There was a strong desire among policy-makers and leaders at OPH to do more to address the complex social, emotional and medical needs of this underserved population and, in 1995, the Louisiana Adolescent Health Initiative (AHI) was created. AHI has taken on the challenge to improve the health status of Louisiana teens by implementing a multi-disciplinary approach to adolescent health care, disease prevention and health promotion in the state. The goal of AHI is for every adolescent in the state of Louisiana to have the opportunity to grow and prosper in a healthy, nurturing and safe environment.

The first objective of AHI is to serve as the central repository of adolescent statistical information in Louisiana through compiling and disseminating qualitative data. The second objective is to assist local communities to identify needs and potential resources, prioritize problems, develop solutions and evaluate impact. The third objective is to coordinate and collaborate with internal programs and external agencies to infuse adolescent voices in planning/policy-making.

In 1996, AHI produced,*Teen Talk: Report of the 1996 Louisiana Youth Focus Groups*. In February 1999, AHI produced the *Louisiana Teen Pregnancy Prevention Directory*. The purpose of this directory is to keep adolescents and health professionals who work with adolescents informed of the existing teen pregnancy prevention services in Louisiana. AHI serves as a repository of information and contributes to adolescent health and quality of life improvement efforts statewide.

AHI has taken on the challenge of improving the health status of Louisiana adolescents. We are taking step-by-step measures to combat the health "ills" that our Louisiana teens are facing. The multi-faceted health problems that our teens are facing are remedied by incorporating multi-faceted solutions, thus we are inviting everyone who works with teens to the table.

For more information on the AHI or the Louisiana Adolescent Data Book please contact:

Trina Evans
Coordinator, Adolescent Health Initiative
Office of Public Health
P. O. Box 60630
New Orleans, LA 70160
(504) 568-6636

Louisiana Healthy Communities Resource Center (HCRC)

The concept of the Healthy Communities Resource Center is founded in the philosophy of the Healthy Communities/ Healthy Cities (HC) movement, which is currently having a significant impact in hundreds of communities across the United States. It emphasizes the use of internal community capacities and broad-based community involvement in recreating a community's future. The HCRC provides communities with tools, methods and technical assistance to assist them in collaboratively addressing their challenges.

The Five Components of the Resource Center

- **The Summit** will gather community teams from business, industry, health care, education, churches and human service organizations to provide skills-building workshops in community strategic planning, share stories of success and hope from communities that are rebuilding themselves, network with other Louisiana community builders and link to resources for community strategic planning.

- **The Healthy Communities Training Center** provides intensive learning opportunities to cross-sectoral community teams regarding collaborative problem-solving, leadership development, engaging community stakeholders, prioritizing community issues, identifying assets, skills and gifts in the community, community needs assessment, developing action plans, implementation of programs and monitoring and evaluation of programs.

- **The Community Health Planning and Assessment Tool Kit** contains methods and tools regarding community coalition building, working collaboratively, conducting community assessments, conducting assets-based assessments, action-planning, moving to action, and evaluation of programs. The kit will be a starting point for communities embarking on a community building process as well as a resource to communities that are already working in a community strategic planning process.

- **The Healthy Communities Technical Assistance Team** is comprised of two professional staff of the HCRC plus five regional healthy communities coordinators currently supported by the Office of Public Health. They provide assistance in all aspects of the community strategic planning process, act as a link between healthy community initiatives throughout the state and plan events that provide new information and offer networking opportunities. As a support mechanism to the Training Center, the Technical Assistance Team will provide concentrated assistance to the community teams while they participate in the training program.

- **The Healthy Communities Library** will maintain a library of tools, methods, stories and examples of successful programs that can be utilized by community teams. The Library and its staff will serve as a link to healthy communities efforts in other states.

For more information on Healthy Communities, please contact:

Scott Whoolery
Healthy Communities Coordinator
Office of Public Health
P. O. Box 60630
New Orleans, LA 70160
(504) 568-7119

Louisiana Adolescent School Health Initiative (School-Based Health Centers)

Where health education and services are concerned, Louisiana's teens comprise our state's most underserved population. In order to provide them with access to care, the state Legislature passed the Adolescent School Health Initiative Act in 1991. Since then, school-based health centers have been established around Louisiana to bring together knowledge about wellness and comprehensive health services for adolescents in the most direct and cost-effective way possible. For locations of centers, please refer to page 28 of this data book.

The program emphasizes the coordinated nature of school health programs by promoting a health education curriculum that addresses the physical, emotional and social dimensions of health and provides services for the assessment, protection and promotion of good health. Other components of a coordinated school health program include a healthy school environment, nutritional integrity of school food service, staff wellness, counseling and psychological services, physical education and parent/community involvement.

Preventive and primary care services at school-based health centers address the physical and psychosocial needs of public middle and high school students, as well as those of children in the feeder primary and elementary grades. They are provided by a multi-disciplinary team composed of physicians, nurses, nurse practitioners and clinical mental health professionals who screen, diagnose, treat, refer and followup to help the students they serve attain maximum physical and psychosocial well being. The team collaborates with school staff and local and state public and private agencies to provide a continuum of care.

Based on the needs of the population they serve, school health centers provide group counseling, peer leadership training, immunization programs, alcohol and substance abuse prevention counseling, health careers counseling, parenting education, tutoring and prenatal care. Some schools have child care centers for the children of students, which enable teen parents to complete their education.

Health and education are joined in fundamental ways in the destinies of our children and thus, the School-Based Health Center program plays a critical part in helping them succeed in school and in life.

For more information on school-based health in Louisiana, please contact:

Sylvia Sterne
Director, Adolescent and School Health
Office of Public Health
P. O. Box 60630
New Orleans, LA 70160
(504) 568-6068

Louisiana SAFE KIDS Coalition

The Louisiana SAFE KIDS Coalition of private, public and voluntary organizations works to prevent unintentional injuries to children under 15 years of age. This is done through a multi-faceted approach of increasing public awareness, providing education and advocating for environmental and public policy changes. Areas of injury prevention programs include the proper use of child safety seats and safety belts, bicycle safety and fire and burn prevention.

For more information on the Louisiana SAFE KIDS Coalition, please contact:

Kerry Chausmer
SAFE KIDS Coalition State Coordinator
Office of Public Health
Injury Research & Prevention Section
P. O. Box 60630
New Orleans, LA 70160
(504) 568-2509

Synar Initiative

The Department of Health and Hospitals' Office of Alcohol and Drug Abuse has been active in a campaign to reduce the access to tobacco products for persons under the age of 18. The office has recruited teens from around the state to participate in this initiative. These young people have been conducting compliance checks of tobacco merchants to ensure they are not selling tobacco products to minors. The Synar Campaign has been successful in both lowering the rate of tobacco sales to minors and allowing teens to be advocates for themselves. Also, a summer project was begun in which college students were recruited in each of the ten regions across the state. This project lasted five weeks and involved the students canvassing their respective regions visiting all tobacco merchants. Merchants will be provided educational information regarding the laws specific to tobacco. The Office of Alcohol and Drug Abuse is very proud to be a part of this initiative and has faith in its continued success.

For more information on the Synar Initiative, please contact:

Leslie Brougham
Prevention Specialist
Office of Alcohol and Drug Abuse
P. O. Box 3868
Baton Rouge, LA 70821-3868
(225) 342-5705

Violence Prevention Program

This Office of Public Health program encourages and assists local organizations working to reduce violence in Louisiana. The Violence Prevention Program includes work to support a statewide network of local violence prevention coalitions. Additionally, the Violence Prevention Program provides a variety of trainings, workshops, speakers and educational materials. Areas addressed include prevention for youth, domestic, family, and workplace violence and general conflict resolution.

For more information on the Violence Prevention Program, please contact:

Rekaya Gibson
Violence Prevention Coordinator
Injury Research & Prevention Section
P. O. Box 60630
New Orleans, LA 70160
(504) 568-2509

Urban Youth Against Violence

Urban Youth Against Violence (UYAV) began February, 1995, as an effort to include youth voices in New Orleans' violence prevention planning. It was founded by 16 youths whose lives had been impacted by violence. The mission of UYAV is to assist city-wide efforts in reducing murder and other violent crime rates. The theme, "Black on Black Violence Can Lead To A World Without Color" is used to promote the UYAV message. Poetry, skits and rap illustrate the message of Urban Youth Against Violence, and UYAV members also mentor other youth.

For more information on Urban Youth Against Violence, please contact:

Omar Scott
Urban Youth Against Violence Founder/Member
Crescent City Peace Alliance
1021 St. Ferdinand Street
New Orleans, LA 70117
(504) 943-7233

Louisiana's Child Health Insurance Program (LaCHIP)

LaCHIP is a program that provides health insurance for eligible children and adolescents. LaCHIP began on November 1, 1998, and covers children from birth to age 19 in families with incomes up to 133% of the federal poverty level. This means that many adolescents will qualify, even if they live in two-parent households and their parents are working.

For more information on who is eligible for LaCHIP, or for an application, call the LaCHIP Office in Baton Rouge at 1-877-252-2447 (1-877-2LaCHIP).

Keeping It R.E.A.L.

The Department of Social Services, Office of Family Support, is implementing a pregnancy prevention program - Keeping It R.E.A.L. (Reality Education About Life). The Office of Family Support has contracted with eight providers in the New Orleans area to implement a pilot program encompassing a wide variety of teen pregnancy prevention programs. These programs stress principles such as education, parental and adult involvement, abstinence and clear strategies for the future and community involvement. In addition, as part of this plan, the Office of Family Support will be conducting a statewide media campaign to combat and reduce teen pregnancy. The campaign goals will be to provide education to the targeted group regarding teen pregnancy prevention and to develop an awareness of the effects of teen pregnancy on the family and society as a whole, with the end result being a reduction in teen pregnancies in our state.

For more information about Keeping It R.E.A.L., please contact:

Vera Blakes
Assistant Secretary
Office of Family Support
P. O. Box 94065
Baton Rouge, LA 70804-9065
(225) 342-3947

Teen Institute

Teen Institute, sponsored by the Louisiana Department of Health and Hospitals, Office of Alcohol and Drug Abuse, began in 1991 as a pilot program for at-risk youth from high schools and community-based organizations throughout the state. The Institute emphasizes self-esteem, positive peer relations, leadership skills and education on the effects of alcohol and other drugs. The program is open to high school students who: 1) earn passing grades; 2) have leadership potential; 3) commit to serve as active team members; 4) plan and deliver alcohol drug prevention programs; and 5) contribute at least two hours per week for such activities throughout the year. This program is not a treatment program; it is an educational and training process to help high school students and team leaders implement prevention programs through positive peer relations.

For more information on the Teen Institute, please contact:

Tina Roper-Auzenne
Program Manager
Office of Alcohol and Drug Abuse
P. O. Box 3868
Baton Rouge, LA 70821-3868
(225) 342-9253

Louisiana Youth Health Congress

The Louisiana Youth Health Congress is sponsored and coordinated by Southeastern Louisiana University's Excellence in Health and Education Project. Youth Health Congress activities are made possible through collaboration and funding provided by the Office of Public Health, the Office of Mental Health, the Office of Alcohol and Drug Abuse, the Department of Education, various grants and community groups. This joint communication effort between adults and high school aged teens is designed specifically to provide a forum for youth to increase their awareness of the health problems endemic to their age group and to empower them to generate their own solutions. Through regional activities and an annual conference, youth participants learn how to serve as health advocates in their communities and develop the leadership skills necessary to make a difference. Success will be measured by the positive outcomes achieved community-by-community and issue-by-issue.

For more information on the Louisiana Youth Health Congress, please contact:

Renee Pesquie
Coordinator, Youth Health Congress
Cate Teacher Education Center
SLU 10749
Hammond, LA 70402
(504) 549-5282

Louisiana Governor's Council on Physical Fitness & Sports

In 1994, the Louisiana Governor's Council on Physical Fitness and Sports unveiled its strategy for improving the overall health of Louisiana's young people by expanding an existing program called the Louisiana Elementary Fitness Meet. The Louisiana Governor's Council on Physical Fitness and Sports annually hosts the Louisiana Elementary Fitness Meet featuring elementary school children. Each participating school will hold its own fitness meet consisting of seven fitness events: the 50-yard dash, shuttle run, sit and reach, curl-ups, standing long jump, pull-ups and the 60-yard run. These events are the same events used in the President's Challenge. The top two scorers in the boys and girls groups from each parish will participate in the state championships.

Currently, 30 parishes offer the President's Challenge to its students as part of their daily curriculum between November and the start of the state championships. In 1994, only seventeen parishes participated in this event. Because of the aggressive recruiting efforts by these parishes, school superintendents, physical education teachers, and the Louisiana Governor's Council on Physical Fitness and Sports, this program influences over 90,000 youth in Louisiana. It is the goal of the Louisiana Governor's Council on Physical Fitness and Sports to have all 64 parishes become involved and obtain an accurate assessment of the physical condition of our school children.

For more information, contact the Louisiana Governor's Council on Physical Fitness and Sports at (225) 342-9500.

Chapter Three

Economic Status

Poverty and Social Welfare

"Some people don't want to take the long way; they want to take the shortcut [to] fast money."

– Adolescent Focus Group Participant

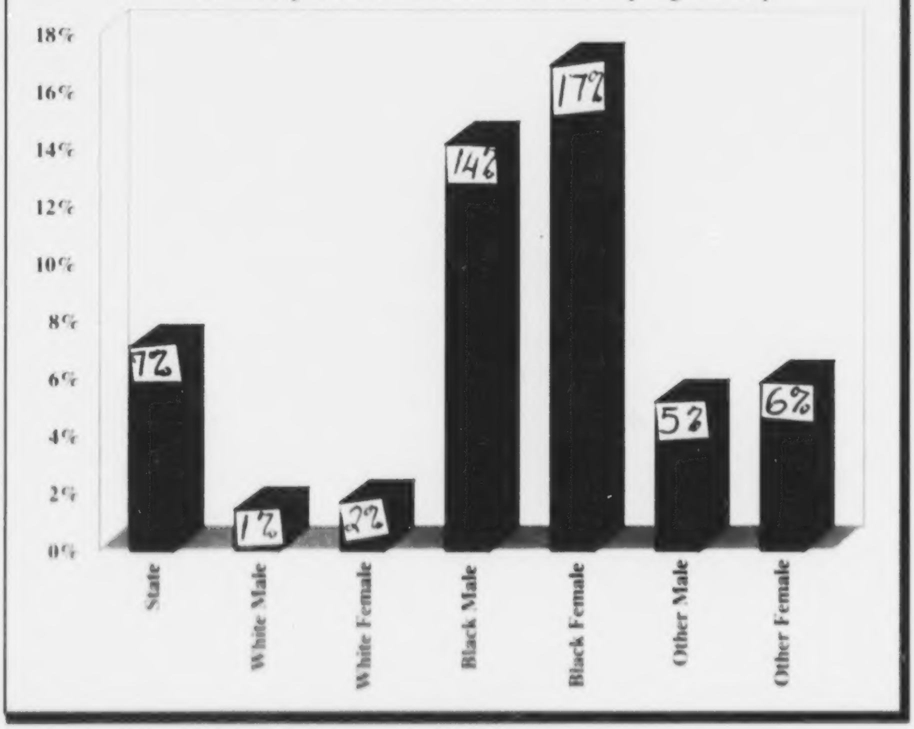
Poverty

The connection of poverty to child and adolescent health outcomes is great. Poverty, low quality (or inaccessible high quality) education, gender inequality, substandard housing, institutionalized racism, and lack of employment opportunities contribute to poor physical, emotional and environmental health of adolescents across the country.

Poverty guidelines are determined by the federal government. Income thresholds that vary by family size and age composition are updated each year to determine a measure for poverty. In 1995, a family of four was considered to be living in poverty if their annual income was below $16,700.[13]

According to the American Legislative Exchange Council in 1994, Louisiana had the most children living in poverty (32%) in the United States.[14] In Louisiana, one in three of all children and one in two African-American children live in poverty, and 35% of the state's adolescents live in poverty.[15]

1996 Percent of Louisiana Children Under 21 Receiving TANF
Data is Adjusted for Gender and Race by Age Group



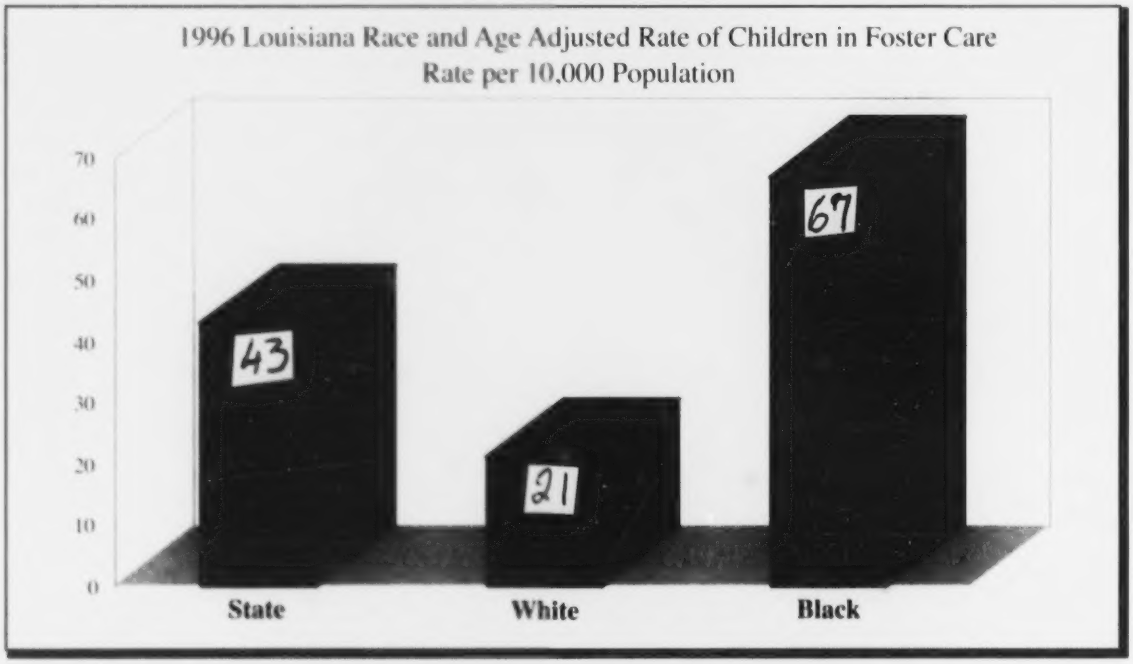
The number of children in poverty can be illustrated by the percent of children under 21 receiving assistance from the Temporary Assistance to Needy Families (TANF). Louisiana data for 1996 indicates that 7% of the state's children receive TANF. Adjusted demographics data indicates that 17% of black females and 14% of black males as compared to 2% of white females and 1% of white males receive TANF. See Appendix, pages A10-A11, for parish-specific data.

Note: Data was adjusted using population specific data by gender and race for pop. < 21.

BEST COPY AVAILABLE

Family Composition

According to *Child Health USA '95*, 18.6 million children in the U. S. lived in families with only one parent in 1994.[16] The majority of these single-parent families are headed by women, although the number of single parent families headed by men is rising. According to the 1997 national KIDS COUNT DATA BOOK, with the exception of Utah, every state in the U. S. saw an increase in the number of single-parent families between 1985 and 1994.[13] Louisiana has the most single-parent families of any state in the country.[13]



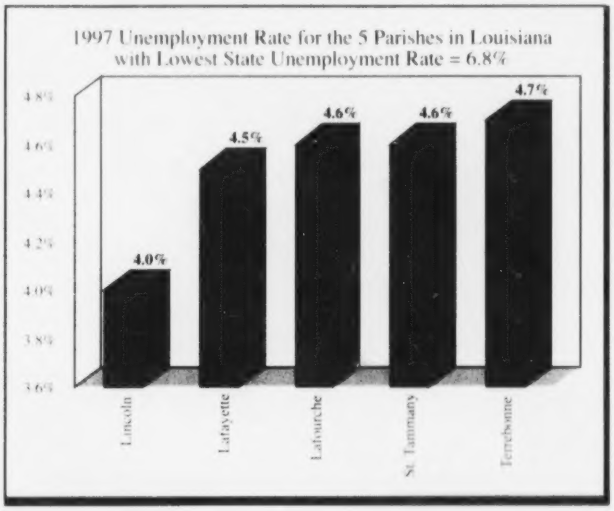
In 1996, 43 out of every ten thousand children (age birth through 18) in Louisiana lived in foster care. Age and race adjusted rates show that 67 per 10,000 black children and 21 per 10,000 white children lived in foster care. See Appendix, page A12, for parish-specific data.

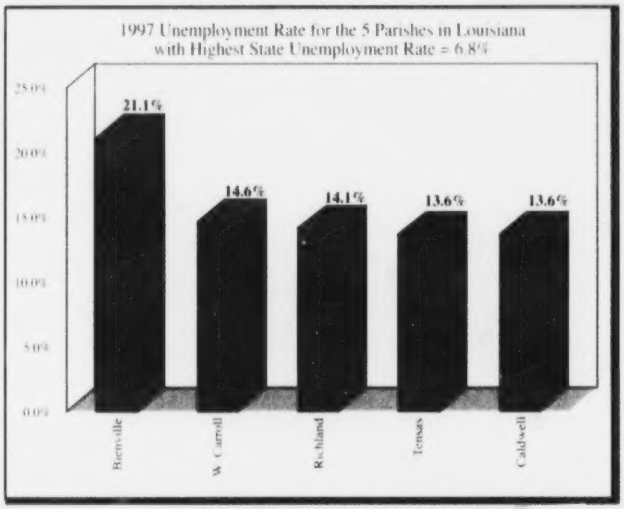
Employment

Managing school, work, family and friends is often a constant juggling act for many adolescents. In addition, the process of maturing from adolescence into adulthood will often include working and managing money properly. This new-found independence is a crucial step in the growth process of every adolescent. Estimates show that 85% of American youth will find employment before leaving high school. Although most youth will find employment for personal monetary purposes, many will have to find jobs to help support their families. Even though the purpose of finding employment for both males and females is similar, there are vast differences in the types of work performed:

- Females most often hold child care, customer service or retail positions;
- Males most often hold manual, physical labor positions, or restaurant food service positions;
- Females learn responsibility, problem-solving skills, public relations skills, and may receive some computer training while on the job;
- Males learn routine, repetitive labor skills that are not usually applicable outside of their current position;
- Females are more often hired for positions which allow them to evaluate future careers and develop mentor relationships with adults;
- Males often experience more on-the-job stress than females.

The Louisiana Department of Labor provides information on a variety of subjects for both adolescents and adults. The following is the Louisiana Department of Labor mission statement: "The Louisiana Department of Labor administers programs and enforces laws designed to protect the economic and physical well-being of Louisiana's work force. The Department coordinates and administers programs conducted by the state or jointly with federal agencies in the areas of labor-management relations, manpower evaluation and training, employment, unemployment compensation, worker's compensation, job safety and the licensing and regulation of private employment agencies, barbers and plumbers."

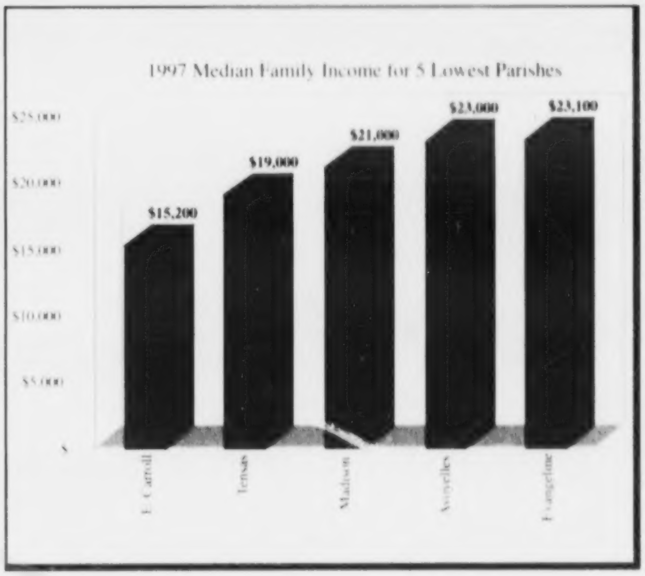

1997 Unemployment Rate for the 5 Parishes in Louisiana with Lowest State Unemployment Rate = 6.8%

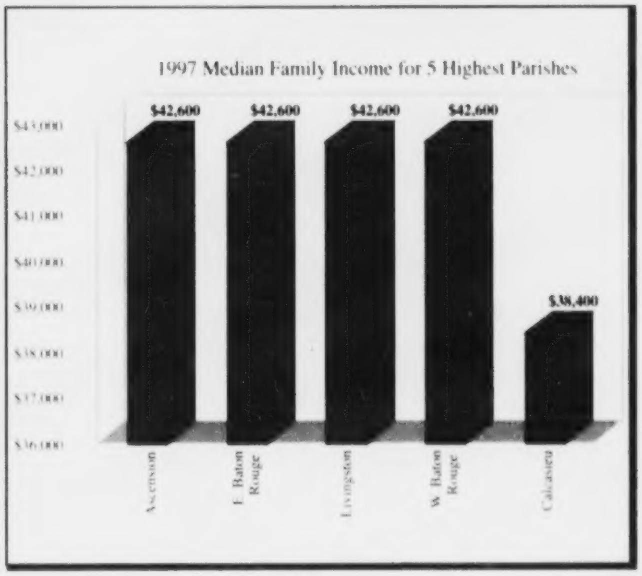

1997 Unemployment Rate for the 5 Parishes in Louisiana with Highest State Unemployment Rate = 6.8%

BEST COPY AVAILABLE

The rate of unemployment in Louisiana is 6.8%. Unemployment figures vary widely by parish. The percent of parish unemployment ranged from a low of 4% in Lincoln Parish to a high of 21.1% in Bienville Parish. See Appendix, page A13, for parish specific-details.

Median family income is an important indicator of family and community well being. There is a wide gap in median family income by parish. The highest family income parishes have approximately twice the median family income as the poorest parishes. This is illustrated in the range of family income from a high of $42,600 in Ascension Parish to a low of $15,200 in East Carroll Parish. See Appendix, page A13, for parish-specific details.





---

[13] Federal Poverty Guidelines. Effective April 1, 1999.

[14] *A Briefing Book for Louisiana Legislators*. Child Welfare League of America and the Southern Regional Project on Infant Mortality, Washington D.C., October, 1996.

[15] Louisiana KIDS COUNT. Agenda for Children, New Orleans, LA 1995.

[16] *Child Health USA '95*. U.S. Department of Health and Human Services, Public Health Service, Health Resources and Services Administration, Maternal and Child Health Bureau, DHHS Publication No. HRSA-M-DSEA-96-5, Washington D.C., September 1996.

BEST COPY AVAILABLE

Chapter Four

Educational Status

Education & School

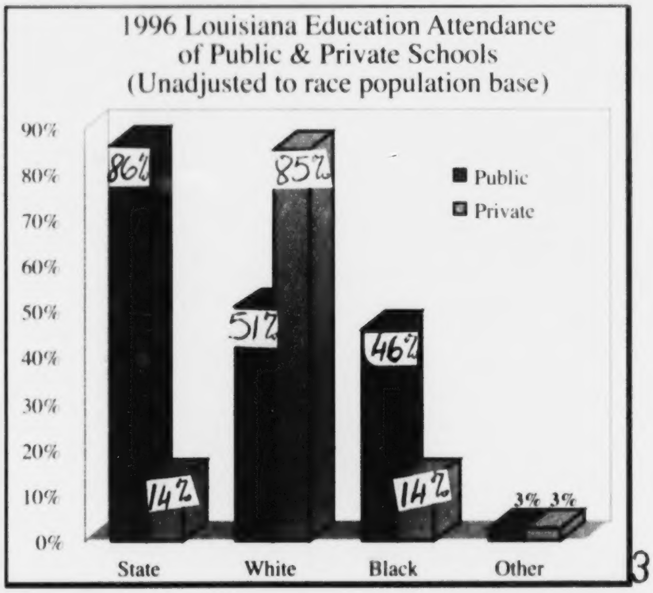
"...people get in trouble because we have nothing to do, so they find something to do and it may not be the right thing."

– Adolescent Focus Group Participant

An individual adolescent's performance in school, high school graduation or drop-out status, suspension and expulsion record, participation in school clubs or organized sports, and enrollment in public or private school are all used to measure the "successes and failures" of our youth. These measures may reflect less on an individual student than on the quality of life for such students in their schools, communities, cities, parishes or even their state. Along with poverty, housing discrimination, racism, sexism and unemployment, access to quality education, illiteracy rates and level of education completed are all confounding factors in adolescent and community health and morbidity. The 1996 KIDS COUNT DATA BOOK, published by the Annie E. Casey Foundation in Baltimore, focuses on the need for improved educational standards for our youth. The data book emphasizes a needed commitment to:

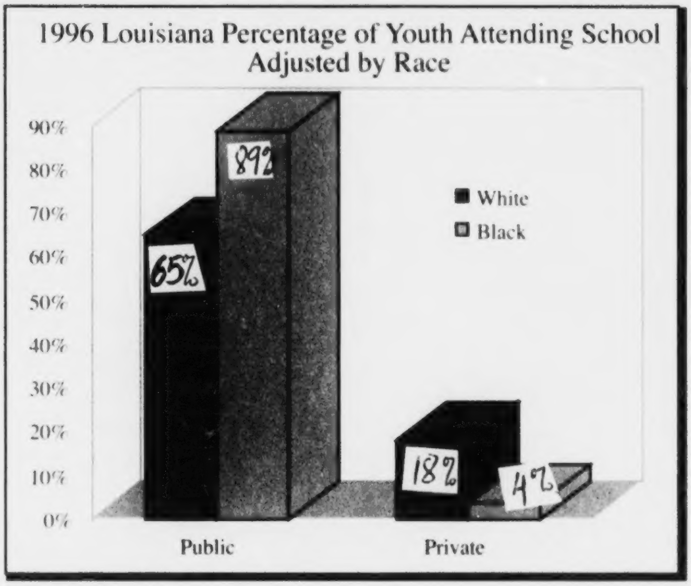
- preschool experiences that prepare children to learn;
- schools that are small enough to engage every child;
- high standards in curriculum, instruction and assessment;
- strong, meaningful family participation; and
- making education part of a larger community commitment to healthy youth and family development.[17]

Similarly, growing up with parents who never completed high school can be a predictor of poor health effects. In Louisiana, one in five children live with a parent who was a high school dropout.[18] In 1994 alone, over 12,000 adolescents dropped out of Louisiana schools, giving the state the highest teen drop-out rate in the country.


1996 Louisiana Education Attendance
of Public & Private Schools
(Unadjusted to race population base)

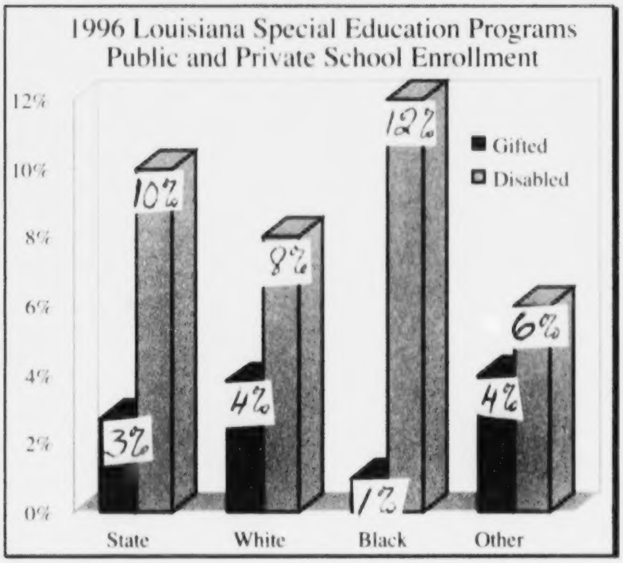
In Louisiana, 88% of youth age 5-19 are enrolled in public and private schools. Black youth are more likely than white youth to be enrolled in school (93% black youth compared to 83% of white youth). The youth who are not enrolled in school are either home schooled or drop-outs.

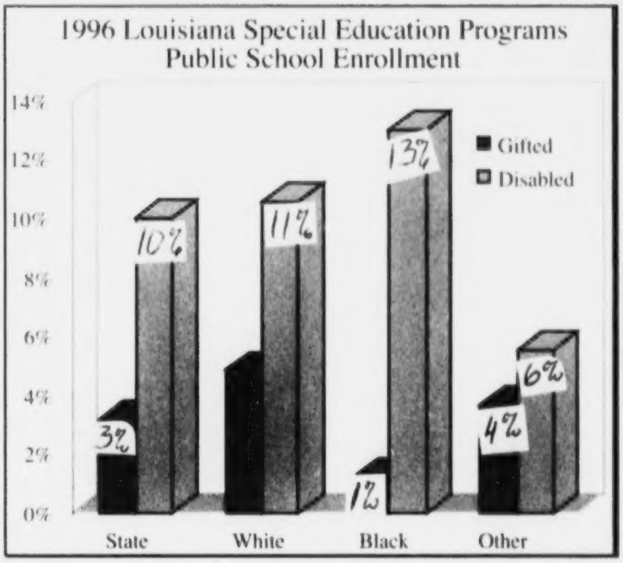
BEST COPY AVAILABLE



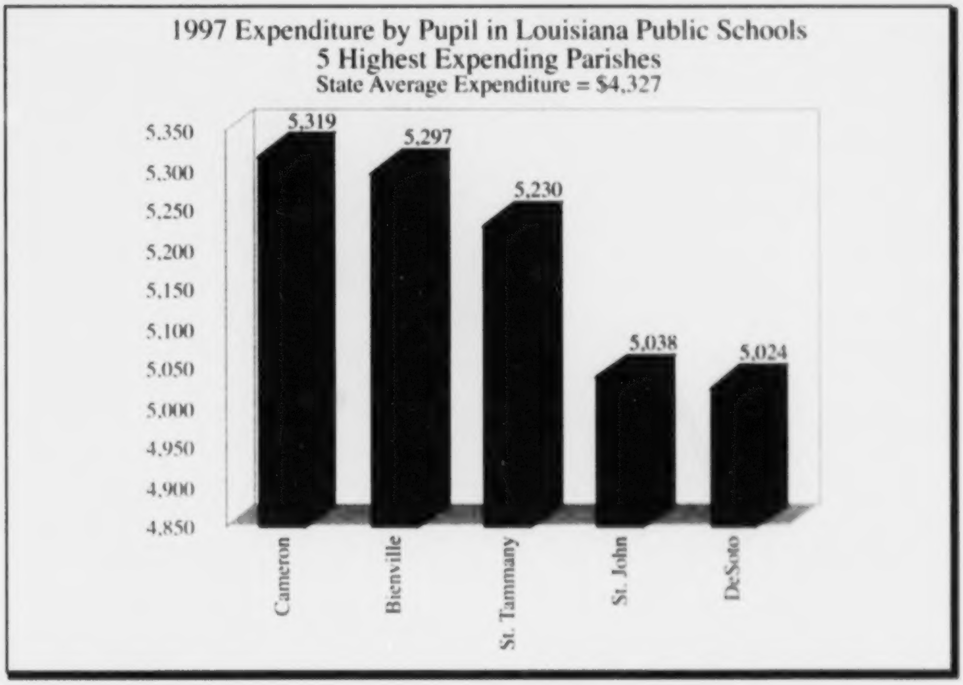
Eighty-six percent of youth attend public school (51% white and 46% black); however, adjusting for percent by race shows that 65% of white youth age 5-19 attend public school and 18% attend private school, while 89% of black youth age 5-19 attend public school and only 4% attend private school. See Appendix, pages A18-A21, for parish-specific details.

Three percent of Louisiana youth attending public and private schools are registered in gifted classes. This figure represents 4% of all white students and 1% of black students attending school. Another 10% of Louisiana youth are registered in disabled classes. This figure represents 12% of black youth and 8% of white students attending school. See Appendix, pages A22-A27, for parish-specific details.



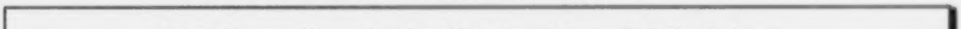


BEST COPY AVAILABLE



1997 Expenditure by Pupil in Louisiana Public Schools
5 Highest Expending Parishes
State Average Expenditure = $4,327

The average parish expenditure per pupil in Louisiana was $4,327. There is nearly 150% difference on the amount parishes spend per pupil from the parish of greatest to least expenditure. Expenditures per pupil ranged from a high of $5,319 in Cameron Parish to $3,618 per pupil in Acadia Parish. See Appendix, page A28, for parish-specific details.



1997 Expenditure by Pupil in Louisiana Public Schools
5 Lowest Expending Parishes
State Average Expenditure = $4,327

After-School Hours

Although the time adolescents spend in school is of critical importance, the time adolescents spend away from school is of tantamount importance. While many urban areas across the country have initiated and are enforcing 8:00 p.m. weekdays or, on weekends, 11:00 p.m., curfews for adolescents, the prime time for adolescents to engage in health and life-threatening risk behaviors is between the hours of 3:00 and 6:00 p.m., immediately after school and while most parents are still at work.[19] Unsupervised and with no structured activity, adolescents often use this time to experiment with drugs and alcohol, engage in unsafe sexual activity, unhealthy eating and tobacco use. The "3:00 to 6:00 p.m. issue" has given rise to a new body of literature that supports the development of adolescent centers for recreation and sports, communication skills, tutoring and homework assistance, entertainment and social activities, job skills training, mental health counseling and primary health care services. Secondary school buildings are a prime location for such "centers." Providing after-school programs can assist in strengthening the assets of our youth, as well as hopefully prevent them from engaging in high-risk behaviors.

School-Based Health Centers

Providing one piece of the puzzle, school-based health centers provide adolescents with health education, a healthy school environment and primary health care services in an easily accessible and cost-efficient manner. For close to a century, schools have been sites for improving the health and well-being of children and adolescents nationwide by serving those who have been unserved or underserved by the traditional health care system.[20]

As of January, 1999, there were 36 school-based health centers in Louisiana (see map on page 28). The top ten conditions for which students visited school-based health centers during the 1997-1998 school year were:

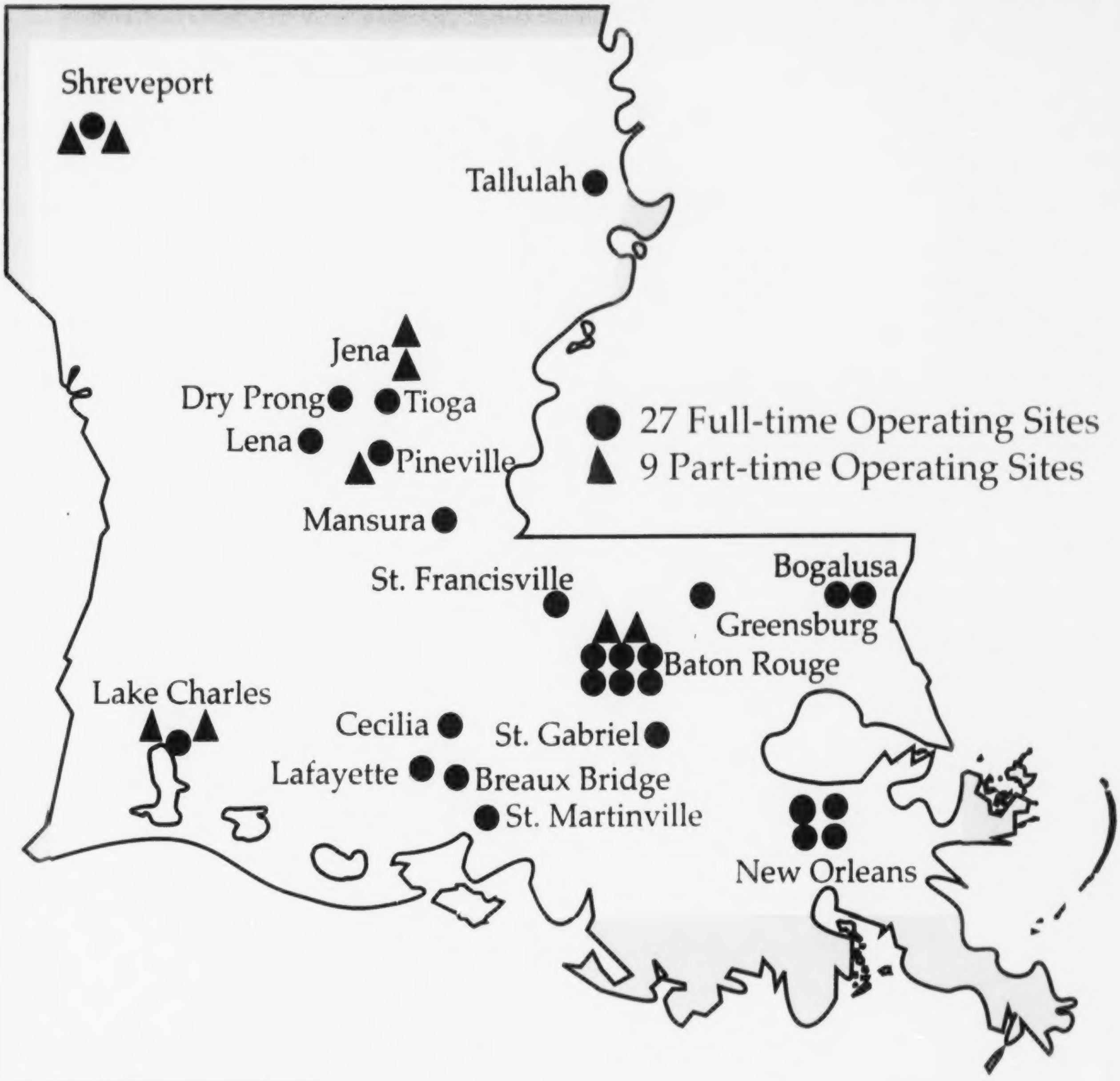
- Health supervision (routine health checks, sports/camp/job physicals, immunizations, lab test follow-ups, dietary surveillance and counseling);
- Medication administration (daily medications given to students with ADD, ADHD, asthma, etc.);
- Symptoms (headache, cold, fever, abdominal pain, throat pain, backache, nausea, vomiting);
- Emotional conditions;
- Conditions of the respiratory system;
- Conditions of the nervous system;
- Injury and poisoning (superficial injuries or contusions, sprains, strains, allergies, burns);
- Conditions of the musculoskeletal system;
- Conditions of the skin;
- Conditions of the ear.[21]

Standardized Testing

As explained by the Louisiana Department of Education, criterion-referenced tests are the Graduation Exit Examinations of the Louisiana Educational Assessment Program and are used to measure academic achievement throughout the state. The secondary level exams include English language arts, mathematics, science, written composition and social studies. Norm-referenced tests are also used by the Louisiana Educational Assessment Program. These tests are used to compare knowledge and achievement of Louisiana students with others nationwide.

The ACT, or the American College Test, is required by the admissions offices of all Louisiana colleges and universities. Louisiana scores are presented by parish and are average composite scores for graduating seniors. The ACT includes four components: English, mathematics, reading and science reasoning. Composite scores range from 1-36.

School-Based Health Center Sites for 1998-1999


Shreveport
Tallulah
Jena
Dry Prong
Tioga
Lena
Pineville
Mansura
● 27 Full-time Operating Sites
▲ 9 Part-time Operating Sites
St. Francisville
Bogalusa
Greensburg
Baton Rouge
Lake Charles
Cecilia
St. Gabriel
Lafayette
Breaux Bridge
St. Martinville
New Orleans

---

[17] 1996 KIDS COUNT DATA BOOK: State Profiles of Child Well-Being. The Annie E. Casey Foundation, Baltimore, 1997.

[18] Ibid, 1997.

[19] Lipsitz, J., *After School: Young Adolescents on Their Own*. The Search Institute, Minneapolis, 1995.

[20] *MCHB Fact Sheet*. Maternal and Child Health Bureau, Health Resources and Services Administration, Public Health Service, U.S. Department of Health and Human Services.

[21] *1997-1998 Annual Services Report of Louisiana School Based Health Centers*. Adolescent School Health Initiative, Louisiana Office of Public Health, Department of Health and Hospitals.

BEST COPY AVAILABLE

Chapter Five

Mental Health, Crime & Violence

Mental Health

Risk Factors Affecting Children and Adolescents

Many routine life events that may seem trivial to adults can be emotionally charged and have a significant effect on a child or adolescent. Such events might be loss of a boyfriend or girlfriend, drop in grades, negative comments, or teasing from peers, a friend, parent or teacher. Such life events may trigger a depressive or other emotional/behavioral state in children or adolescents and show the great need for a strong support network of family, especially parents, friends, teachers, coaches and/or other significant adults.

Depression is a common condition that is often underdiagnosed in the child and adolescent population. It can lead to serious and significant problems with families, school, work and personal adjustment that can be carried into adulthood. Normally, depression can be managed by a family physician and the support of the child or adolescent's family.[22]

In addition to depression, children and adolescents experience a wide range of emotional and behavioral conditions which can also affect their ability to function successfully. Temporary impairments of social, academic and personal care skills can be exhibited by confused thinking, hyperactivity, impulsiveness, aggressiveness, defiance of rules, anxiety, school refusal/avoidance, sleep disturbances or eating disorders. More severe manifestations may include homicidal and/or suicidal ideation or overt psychotic behaviors.

Emotional or behavioral symptoms which can be recognized by friends and family of the child or adolescent include general sadness that may be shown through sleep disturbances characterized by all-night TV watching, sleeping during the day, difficulty in waking up for school, a lack of motivation and lowered energy level for school work with consequent drop in grades, moodiness, irritability or even aggressiveness towards parents or siblings but usually not toward peers. All symptoms are not usually present. However, combinations of some may warrant extra support or consultation with a physician or mental health professional.

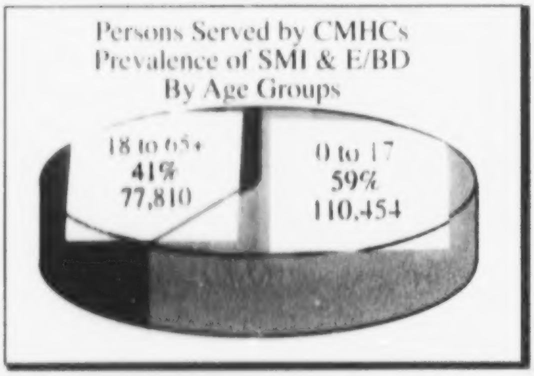
Mental Health Interventions

Treatment for psychiatric symptoms may include psychotherapy, medication or behavioral interventions and/or social support to the child/family. Early diagnosis and family involvement with the child or adolescent's treatment have been shown to be a most effective approach to successful treatment. The Office of Mental Health (OMH) supports school-based mental health programs at four School-Based Health Centers and provides school-based mental health services in 125 schools around the state. These programs ensure early diagnosis and early treatment in a familiar, consumer friendly environment which encourages participation by the family in the child or adolescent treatment. OMH-sponsored and other local family support groups, such as Federation of Families for Children's Mental Health and Families Helping Families, assist families in maximizing their access to OMH, school and other community agencies to assure successful treatment interventions for their children.

Access to Office of Mental Health Services

Access to OMH community-based mental health services is through one of 43 mental health centers or 31 mental health outreach clinics located across 64 parishes. All regions have 24-hour crisis phone lines, face-to-face 24-hour emergency assessment and availability of acute hospitalization. Out-patient sites provided 4,733 children/adolescents with 54,375 mental health services in FY 97/98. Attention Deficit/Hyperactivity Disorder, Major Affective Disorders, Depressive Disorders and Adjustment Disorders comprised the top four diagnoses for these children and adolescents. Each region of the state has a Children's Program Coordinator to assure that comprehensive wrap-around mental health services are accessible in an effort to avoid out-of-home placement of the child or adolescent. The New Orleans Adolescent Hospital, Southeast Louisiana State Hospital and Central Louisiana State Hospital provided 1,071 children/adolescents with inpatient services in FY 97/98. Children and adolescents are screened for admission by the Single Point of Entry (SPOE) process to assure that alternative community-based treatment services have been considered prior to the decision to admit to an inpatient facility.

To receive services at the community mental health centers (CMHCs), age, diagnosis, disability and duration criteria established for the emotional/behavioral disordered are used. The Department of Education Division of Special Populations use the same E/BD criteria in determining eligibility for services. Children under 18 years of age must have a condition which has lasted at least three months and will persist for at least a year. This is usually a diagnosis with a degree of severity which seriously impacts contact with reality, severely impairs social, academic or self-care skills, serious discomfort from anxiety, suicidal depression, irrational fears or a Diagnostic and Statistical Manual of Mental Disorders (4th edition) diagnosis indicating a severe mental disorder such as schizophrenia, psychosis or severe conduct disorder. It is estimated that 110,450 children and adolescents in Louisiana suffer with a serious emotional disorder.



SMI = Seriously Mentally Ill
E/BD = Emotionally Behaviorally Disturbed

Summary of Information on FY 97 Selected Services

- 43 CMHCs provide services to 39 (60%) parishes; 38 (86%) serve children/youth
- 31 outreach sites provide services to 34 (53%) parishes; 7 (22.5%) serve children/youth
- 56 (88%) of Louisiana's parishes are rural
- 31 (72%) of 43 CMHCs are located in rural parishes
- 30 (97%) of 31 outreach sites are located in rural parishes
- 13 (23%) of 56 rural parishes have school-based mental health services provided in 84 different schools
- 116 (72.5%) of 160 schools provide mental health services in rural parishes

BEST COPY AVAILABLE

For More Information about Mental Health for Children and Adolescents

Please Contact the Louisiana Office of Mental Health
Children's Program Coordinator for your Region

Region I
Gilda Armstrong-Butler
Region I Administration Office
136 South Roman Street, 2nd Floor
New Orleans, LA 70112
(504) 556-9730; (504) 556-9778
FAX: (504) 556-9874; Beeper: (504) 679-7728

Region II
Stanley Mong
Capital Area Human Services District
4615 Government Street, Bldg. B
Baton Rouge, LA 70806
(225) 925-1768
FAX: (225) 925-1987

Region III
John Navy
c/o Terrebonne Mental Health Center
500 Legion Avenue
Houma, LA 70364
(504) 857-3615
FAX: (504) 857-3706

Region IV
Sonja LeBlanc
c/o Acadiana Mental Health Center
400 St. Julien Street
Lafayette, LA 70506
(318) 262-4177
FAX:(318) 262-4183

Region V
Hortensia Vincent
c/o Lake Charles Mental Health Center
4105 Kirkman Street
Lake Charles, LA 70605
(318) 475-8600
FAX:(318) 475-8054
Beeper: (318) 479-3353

Region VI
John McDaniel
c/o Alexandria Mental Health Center
P.O. Box 7473
Alexandria, LA 71306
(318) 487-5598
FAX:(318) 487-5040

Region VII
Russell Semon
c/o Shreveport Mental Health Center
1310 N. Hearne Avenue
Shreveport, LA 71107
(318) 676-5111; 676-5133
FAX: (318) 676-5021

Region VIII
Helen Boyd
c/o Monroe Mental Health Center
P.O. Box 1843
Monroe, LA 71210
(318) 362-3339
FAX: (318) 362-3336

Region IX
Melanie Watkins
c/o Lurline Smith Mental Health Center
900 Wilkinson Street
Mandeville, LA 70448
(504) 624-4450
FAX: (504) 624-4461

Region X
Vicki Scanlan-Leishman
c/o Jefferson Parish Human Services Authority
3101 West Napoleon, Suite 107
Metairie, LA 70001
(504) 838-5750
FAX: (504) 838-5749

State Office of Mental Health
A.E.Voigt
Child Day Programs Specialist
P. O. Box 4049
Baton Rouge, LA 70821-4049
(225) 342-9965
FAX: (225) 342-5066

Violence and Crime

"I'm worried about going outside, wondering if I'm going to live to see the rest of the day... or am I gonna get shot, mugged, raped, stabbed, whatever."
– Adolescent Focus Group Participant

Poverty, racism, inequality and lack of opportunity breed and sustain violence in this country and in Louisiana. Movies, television and popular music suggest to our youth that violence is not only a normal part of everyday life, but an accepted part as well. In turn, America's adolescents are at disproportionate risk for becoming victims of violence in their schools, communities and homes. Adolescents are also more likely to commit violent acts against another individual. Violence is defined as the use of force with the intent to do bodily harm to oneself or others[23], and it includes homicide, domestic and sexual violence, child abuse and neglect, suicide, assault and battery.

According to the National Adolescent Health Information Center, homicide rates for males of all races dramatically increase in late adolescence and again in early adulthood. Data from 1995 from the Council on Alcohol and Drug Abuse states that each month in Louisiana, 45% of adolescents will be in a fight and 29% of adolescents will carry a weapon. As a result, Louisiana has the highest teen violent death rate for adolescents aged 15-19 in the entire country.[24]

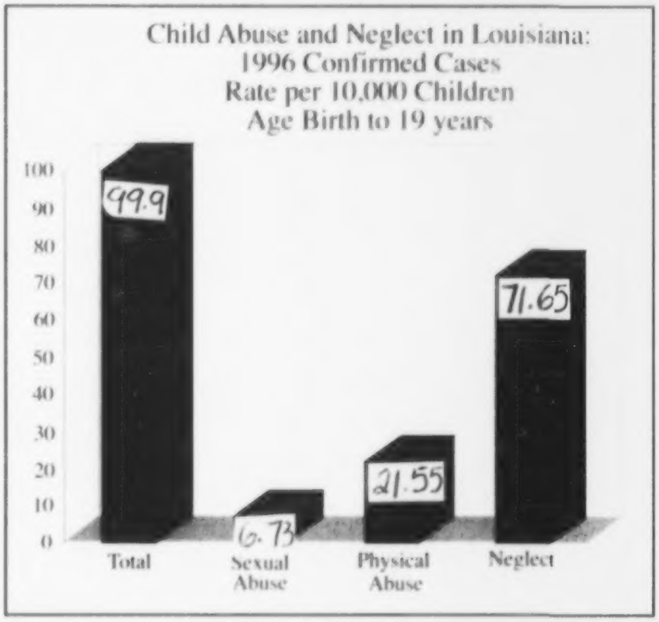
Whether a victim or a witness, child abuse and neglect within the family places adolescents at high risk for serious physical, mental and social health problems, including school failure. In the Study of National Incidence of Child Abuse and Neglect, the most common abuse was physical, followed by emotional and sexual; the most common kind of neglect was educational, followed by physical and emotional. The study further reports that sexual abuse of children has been on the rise.[25]

Adolescent females aged 16-19 are more at risk of being raped or sexually abused than females in any other age group.[26] Nationally, over 50% of all births to adolescents are fathered by men over the age of 20. In Louisiana, approximately two-thirds of fathers of children born to adolescent mothers are 20 years old or older.

Suicide is the third leading cause of death among adolescents nationwide.[27] Suicide is more common among young males than young females, although more females than males attempt to commit suicide. It is more prevalent among Native American, Alaskan Natives and White males than their African-American, Asian or Latino counterparts.[28] One in four students responding to the 1997 Louisiana Youth Risk Behavior Survey had made a plan about how they would attempt suicide in the past year.

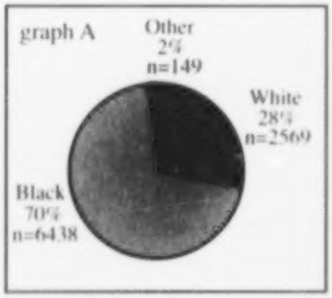
Offenders under the age of 21 commit more than one-fourth of all violent crime. Older teenagers between the ages of 17 and 19 are the most violent of all age groups.[29] Louisiana has the 6th highest juvenile violent crime arrest rate for adolescents aged 10-17 years.[24]

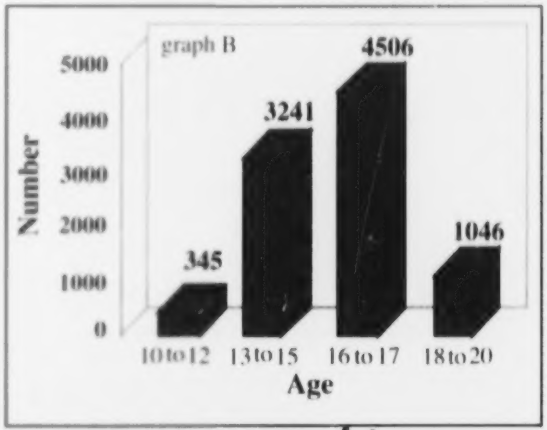
Each year, over two million American children and adolescents are arrested. Of these, more than 600,000 are incarcerated in juvenile or correctional facilities.[30] Most of these juvenile offenders have not committed any violent or serious crimes. Instead, they are victims of poverty, abuse, neglect or emotional disorders.[31] The health and well-being of incarcerated youth are of critical concern for all of those working to improve public health and social welfare nationwide. Nationally, males account for over 80% of all incarcerated youth.[32] Many adolescents who leave the juvenile justice system are quick to return. As of January 1994, almost 40% of adolescents who were released from the Louisiana Office of Youth Development's secure or non-secure custody had recidivated.[33] In addition, many Louisiana youth are in boot camps and after-care programs.

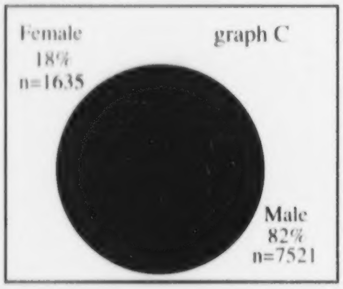

Child Abuse and Neglect in Louisiana:
1996 Confirmed Cases
Rate per 10,000 Children
Age Birth to 19 years

In 1996, 100 per 10,000 Louisiana children (n=13,749) were victims of confirmed cases of child abuse and neglect. The rate of sexual abuse was nearly 7 per 10,000 children, physical abuse was almost 22 per 10,000 children and neglect was over 71 per 10,000 children. See Appendix, pages A30-A32, for parish-specific details.

In 1997, 128 per 10,000 adolescents (n=9,156) in Louisiana were juvenile offenders (custody and non-custody population). Black youth were nearly twice as likely as other non-white youth (Asian, Latino or other) and four times more likely than white youth to be offenders (234 per 10,000 blacks, 107 per 10,000 other youth and 61 per 10,000 whites were offenders, see graph A. Juveniles age 16-17 were the most likely to be offenders (see graph B) and males were eight times more likely to be offenders than females (offenders are 82% male and 18% female), see graph C. See Appendix, pages A33-A34, for parish-specific details.


graph A


graph B


graph C

BEST COPY AVAILABLE

---

[22] Blackman, M. "*You Asked About...Adolescent Depression.*" Depressive Disorders. 1995. <http://www.mentalhealth.com/mag1/p51-dp01.html> (May 24, 1997)

[23] *Violence as a Public Health Problem: Developing Culturally Appropriate Prevention Strategies for Adolescents and Children.* Proceedings of the 1992 Public Health Social Work Maternal and Child Health Institute, Pittsburgh, 1992.

[24] 1996 KIDS COUNT DATA BOOK. Annie Casey Foundation.

[25] *Healthy People 2000: National Health Promotion and Disease Prevention Objectives.* Department of Health and Human Services, Washington D.C., 1990.

[26] Hearing of the House of Representatives Select Committee on Children, Youth and Families: "*Women, Violence and the Law.*" September 16, 1987.

[27] *Fact Sheet on Adolescent Suicide.* National Adolescent Health Information Center, May 1995.

[28] Ibid, 1995.

[29] *Activism 2000 Project Fact Sheet for 1996 Florida Youth Conference on Health.* Originally taken from House Judiciary Subcommittee.

[30] Thompson, L. and Sheahan, P. (1994). Health Care of Incarcerated Youth: State Programs and Initiatives. Arlington, VA: National Center for Education in Maternal and Child Health.

[31] Ibid, 1994.

[32] *Fact Sheet on Out-of-Home Youth.* National Adolescent Health Information Center, August 1996.

[33] Louisiana Department of Public Safety and Corrections Master Plan, October 1995.

Chapter Six

Homeless Adolescents

Homelessness - Defined
Education Programs - Who is Eligible?

by Luke Chiniche, Jr., Ed.S.
Adopted from Donna Bolt, Oregon Homeless Education Coordinator

Where do homeless people live?
As the prelude to a discussion about homelessness, this question tends to trigger some predictable responses, such as they live in shelters, under bridges, in their cars.

However, when we start to think outside the box in defining what is meant by "homelessness," we may become more aware of people living in circumstances which, while technically "housed," are actually so impermanent, uncomfortable or unsafe as to be detrimental to the pursuit of a productive livelihood.

In relation to children, youth and families, "homeless" and "highly-mobile" have been operationally defined by the Louisiana Department of Education (LDE) Homeless Program, so that virtually any child or youth whose living circumstances are such that they are not able to access and /or succeed in school can be served. (This presumes the child or youth is not already receiving full educational services through another federal educational program, such as Migrant Education.)

Following are broad definitions of homeless and highly-mobile, which the LDE Homeless Program uses to determine eligibility for educational services through the McKinney Homeless Education and Title 1A programs at the state and local levels. The point of these definitions is to be more inclusive than exclusive; children and youth who are considered at risk of becoming homeless are also eligible for services under these programs. Exceptions to the definitions describing circumstances, which are not considered "homeless," are also included.

Definitions: Homeless and Highly-Mobile Children and Youth

The Stewart B. McKinney Homeless Assistance Act (P.L. 100-645) defines a homeless individual as "one who lacks a fixed, regular and adequate nighttime residence and/or who has a primary nighttime residence that is a short-term or transitional shelter, or a place not designed for or ordinarily used as a regular sleeping accommodation for human beings."

Homeless children and youth may be accompanied by family members, or be on their own (unaccompanied). The U.S. Department of Education advises that determinations of whether a child or youth is homeless should be made on a case-by-case basis.

In Louisiana, expanded definitions have helped local districts understand who may be in need of assistance. Children and youth living in the following types of situations are eligible for assistance from local homeless education programs:

- ***Children and Youth in Transitional or Emergency Shelters***

Children and youth in transitional or emergency shelters, with or without other family members, are considered homeless. This applies to families and youth in shelters for economic reasons, as well as to those who are displaced from housing due to natural or other disasters (e.g., earthquakes, flooding, house fire). In the event of massive homelessness, such as that which can be caused by natural disasters, it is suggested that districts provide services for one family or individual student only to the degree that similar services can be extended to all families and students in the district presenting similar needs.

● *Children and Youth Living in Trailer Parks, Camping Grounds, Vehicles*

Children and youth residing temporarily in trailer parks or camping areas because they lack adequate living accommodations should be considered homeless. Those living in trailer parks or camping areas on a long-term basis in adequate accommodations should not be considered homeless. Inadequate shelter/housing can include that which lacks electricity, plumbing or sufficient heating, as well as housing affected by unhealthy circumstances such as head lice infestation, particularly when such circumstances lead to frequent school absences and /or poor school performance.

● *Children and Youth "Doubled-Up" in Housing*

Children living in "doubled-up" accommodations, sharing housing with relatives or friends, are considered homeless if they are doubled-up because of loss of housing or similar circumstances which force them to share housing. Families voluntarily living in doubled-up accommodations to save money generally should not be considered homeless, but should be considered eligible for services if the accommodations are such that the children involved have difficulty accessing or succeeding in school. For example, overcrowded housing can have detrimental effects on student school performance. The U.S. Census Bureau considers housing overcrowded if there are more than 1.5 persons per room (i.e. three people living in a two-room apartment may not be overcrowded, but four people in the same space would be considered as such).

● *Children and Youth Living in Motels and Weekly-Rates Apartments*

Some social service agencies will provide vouchers to motels for clients, in lieu of emergency shelter space. Children and youth placed in motels for lack of shelter space are still considered homeless. Other families find motels to be affordable, while move-in expenses and deposits for more permanent housing are not within reach. Children and youth who live under such circumstances are eligible for homeless education services to the extent that they are inadequately housed (e.g., without cooking facilities) and/or are living in over-crowded situations.

● *Foster Children and Youth*

In general, children and youth in foster homes are not considered homeless. Many foster children are in the care of a public agency awaiting placement in more permanent situations. The foster home, although temporary, serves as a fixed, regular and adequate nighttime residence. Children placed in foster homes for lack of shelter space, however, should be considered homeless.

Incarcerated Children and Youth

Children and youth who are incarcerated for violation or alleged violation of a law should not be considered homeless, even if prior to their incarceration they would have been considered homeless because they were living in inadequate accommodations. Children and youth who are under care of the state and are being held in an institution because they have no other place to live should be considered homeless. Once these children are placed in more permanent facilities, they are no longer considered homeless.

Migratory Children and Youth

Migratory children and youth should not be considered homeless simply because they are children of migratory families. To the extent that migratory children and youth are living in accommodations which are unfit for habitation, they should be considered homeless. In Louisiana, children from migratory families who are not in the service area of a Migrant Education Program are eligible for services from school district homeless education projects.

Unaccompanied Minors: Runaway and Abandoned Youth

Children or youth who have left home and live in runaway shelters, abandoned buildings, with friends, on the streets, in parks or other inadequate accommodations are considered homeless, even if their parents have provided or are willing to provide a home for them. Abandoned youth, those whose parents will not permit them to live at home, or those who have been left on their own are also considered eligible for services. The term "constructive runaway" has been used in Louisiana to describe youth who have fled abusive situations in their parental homes.

Highly-mobile Families and Youth

Highly-mobile children and youth may move frequently as part of families in search of housing or work, as part of the migratory labor force or for many other reasons. This includes all children and youth whose frequent school changes may result in reduced school attendance, instability, erratic performance and socialization difficulties. Highly-mobile children and youth, while perhaps not always categorically "homeless," have some of the same needs as those who are homeless due to lack of affordable housing and can benefit from some of the same services. Students who have had two or more school changes in a year should be regarded as eligible for homeless programs' services if they demonstrate such needs, as listed above.

What can we do to help homeless people?

Volunteer at a soup kitchen! Donate your cast-offs! Make sure they can have a turkey dinner at Thanksgiving, like everyone else.

Just as there are common characterizations about where homeless people live, so there are common ideas on how to help the homeless. One classic response, delivered by a comfortably-housed five-year old, probably makes the most sense: "Why don't we just get them a home?"

The LDE Homeless Program challenges schools and districts to address the needs of homeless and highly-mobile families and youth in ways which will have a positive impact on their ability to access and succeed in school. Some suggested activities to start local programs appear below.

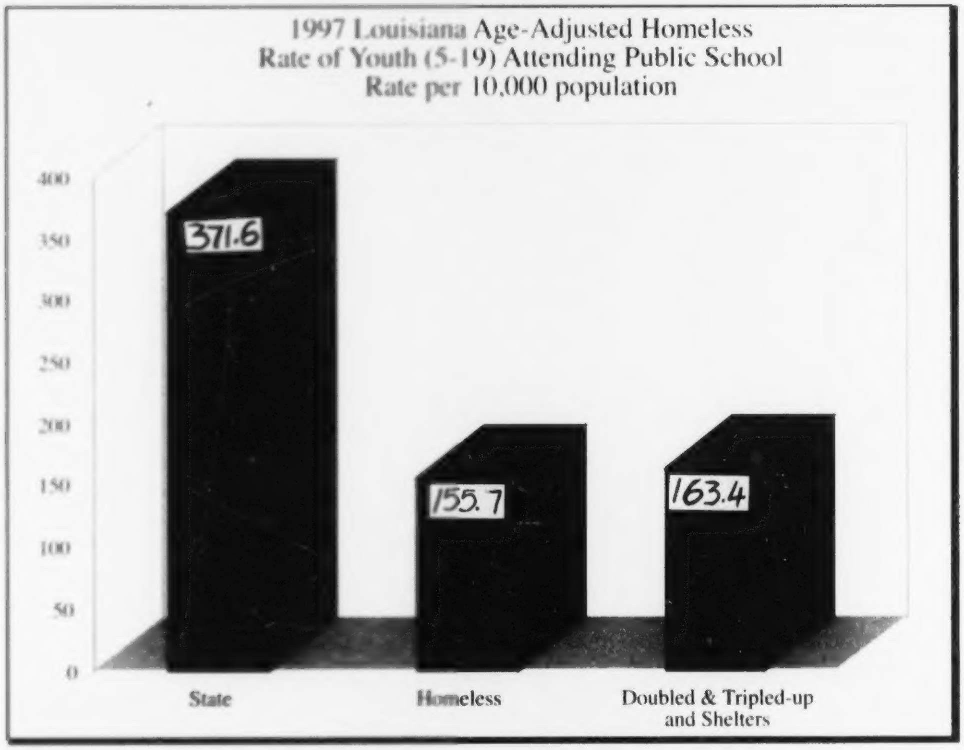
Activities for School Districts to Address the Needs of Homeless and Highly-Mobile Families

- Designate a liaison for the district to act as a contact person, outreach worker and advocate for homeless and highly-mobile families and youth.
- Identify local service providers (shelters, food banks, community agencies) and print a contact sheet for newly-arriving families. Attend local homeless coalition meetings or other advisory groups, where the needs of area homeless people are discussed.
- Print brochures and posters to inform parents and youth of their rights to public education, even if they don't have an address (samples are available from LDE) and to provide contact information for assistance with school enrollment and attendance. Distribute printed material at shelters, food banks, laundromats, weekly-rates motels, etc.
- Collect clothing, shoes, school supplies, hygiene products and other goods through donations and distribute to students and families in need. Try to locate sources for new items, instead of only collecting used goods.
- Strive to make newly-arriving families and youth feel welcome at school and in your community, even if you know they are not planning to be in the area very long.

Runaway, Homeless and Street Youth

Runaway, homeless and street youth are those youth who have no permanent residence. Many of these youth are considered to have been "pushed away" or "thrown away," as they are often forced to leave their homes.[34] In addition:

- The average age for homeless and runaway youth is 14-16 years;
- Of homeless and runaway youth surveyed, 60% reported regular use of alcohol and 20-50% reported regular use of drugs, such as heroin and cocaine;
- Nearly one-third of homeless youth have previously attempted suicide. [35]



A total of 372 children out of every 10,000 children (age birth - 19) attending public school in Louisiana are homeless. This figure reflects the more than 156 per 10,000 who are homeless and another 163 per 10,000 who live in near temporary housing like shelters or weekly-rate motels. See Appendix pages, A36-A37, for parish-specific details.

---

[34] *National Adolescent Health Information Center Fact Sheet*. August 1996.

BEST COPY AVAILABLE

[35] Ibid. 1996.

Chapter Seven

Risk Behaviors

1997 Louisiana Youth Risk Behavior Survey

> "Six categories of behaviors contribute to the leading causes of morbidity and mortality in the United States: behaviors that contribute to unintentional and intentional injuries; tobacco use; alcohol and other drug use; sexual behaviors that contribute to unintended pregnancy and STDs (including human immunodeficiency virus [HIV] infection); unhealthy dietary behaviors; and physical inactivity. These behaviors, which frequently are interrelated, often are established during youth and extend into adulthood." [36]

The Youth Risk Behavior Survey (YRBS) is a national survey of the Centers for Disease Control and Prevention, Division of Adolescent and School Health. Administered by the Department of Education, the 1997 Louisiana YRBS provides information on the prevalence of these risk-behaviors among Louisiana adolescents.

The 1997 sample included all public schools in Louisiana with grades 9 - 12, excluding Orleans Parish. A total of 3,897 student surveys were completed within 61 Louisiana secondary schools during the spring of 1997. A sample of the findings from the 1997 Louisiana YRBS is as follows:

- 84% ever consumed alcohol
- 44% ever used marijuana
- 37% were in a physical fight in the past 12 months
- 7% vomited or took laxatives to lose weight during the past 30 days
- 23% never or rarely wore a seatbelt when riding in a car driven by someone else
- 9% carried a weapon during the last 30 days
- 40% were trying to lose weight
- 38% reported smoking cigarettes during the 30 days preceding the survey
- 6% ever used cocaine
- 10% attempted suicide in the past year
- 11% used chewing tobacco or snuff within the past 30 days [37]

The 1997 Louisiana YRBS found the following health behaviors in need of improvement:

- wearing a helmet while riding a bicycle or motorcycle
- refusing to ride with drivers who have been drinking
- using conflict resolution skills to avoid physical fights
- refusing substances such as tobacco, alcohol or marijuana
- consuming less sugars and fats and more vegetables and fruits
- using appropriate weight control procedures

Alcohol, Drug, Tobacco Use & Gambling

"Drugs are a big problem around here. Everywhere you go, somebody on this corner [is] selling drugs"

– Adolescent Focus Group Participant

Substance Abuse

Substance abuse is on the rise among American adolescents. According to Child Health USA '95, alcohol, marijuana and cocaine use has risen steadily since 1992.[38] National surveys report that over half of all high school seniors report using alcohol monthly, although the legal drinking age in most states, including Louisiana, is 21 years old.[39] Drunk driving is against the law in every state. Most states define "drunk" as having a blood alcohol concentration of 0.10%.

Alcohol use can lead to short-term or chronic physical and mental health problems, accidental injury, family disturbances, poor academic performance or school drop out, and financial and legal problems. According to the 1997 Louisiana Youth Risk Behavior Survey (YRBS), 56% of the state's adolescents will have had at least one alcoholic drink on one or more of the past 30 days. Also, in the 1997 Louisiana YRBS, 41% of adolescents reported that they had their first alcoholic drink before the age of 13.

Louisiana Takes A Stand reports that between the years of 1991-1994, marijuana use among eighth graders doubled and daily marijuana use among high school seniors is up by 50% during the same time period.[40] In the 1997 Louisiana YRBS, 44% of the adolescents surveyed reported that they have used marijuana one or more times in their lifetime and 24% reported using it one or more times in the past month.

Tobacco

"It's something to do all the time; without smoking, you kind of get bored."

– Adolescent Focus Group Participant

Smoking remains the leading cause of avoidable premature death.[41] Even though there has been a reported decline in adult smoking prevalence between 1965 and 1990, adolescent smoking declined until 1984, when a marked increase occurred and tobacco use gradually rose through 1993.[42] Two-thirds of America's youth have tried smoking [43] and more than 80% of regular smokers start before age 18.[41] **Currently 3,000 adolescents become regular smokers every day [41] and 50 percent of all people who start smoking today will be addicted to cigarettes for 16 to 20 years.[44]** This addiction will lead to a continued increase of health care costs and premature deaths.[41] Thus, it is evident that prevention strategies implemented at an early age are very important, especially when the initiation of daily smokers most often begins between the 6th grade and 9th grade.[45] With more than three million children and adolescents currently smoking, the FDA reported that the number of eighth graders who smoke increased 30% between 1991 and 1994.[41]

Even though the use of cigarettes by adolescents is a major concern, the use of smokeless tobacco has been greatly overlooked. The Monitoring the Future Survey [45] reported a slight decrease among 8th graders who currently used smokeless tobacco between 1991 (6.9%) and 1993 (6.6%). A slight increase was found among 10th graders who currently used smokeless tobacco between 1991 (10.0%) and 1993 (10.4%).[43]

Project NIC, a tobacco prevention program, surveyed 541 sixth grade students in Louisiana. This study looked at the correlates of tobacco use and the effects of tobacco education on knowledge, attitudes and behaviors of 6th graders in Louisiana. The significant correlates associated with cigarette use found by Project NIC were: 1) if the student's best friend used to smoke, but quit; 2) if the student did not know if the best friend smoked; 3) if the student's best friend did smoke; and 4) if someone in the student's family under 18 years old smoked. The significant correlates associated with smokeless tobacco use found by Project NIC were: 1) if the student's best friend used to chew tobacco, but quit; 2) if the student's best friend did chew tobacco; 3) if the student was a race other than black or white; 4) if someone in the student's family under 18 years old smoked; 5) if someone in the student's family under 18 years old chewed tobacco; 6) if someone in the student's family over 18 years old chewed tobacco; 7) if the student scored in the middle on the knowledge scale questions; and 8) if the student scored low on the knowledge scale questions. For more information regarding Project NIC, please contact Dr. Millie Naquin in the Excellence in Health and Education Project at Southeastern Louisiana University at 504/549-5251.

Gambling

A study conducted by the Louisiana State University Medical Center Psychiatry Gambling Studies Unit was used to determine the prevalence of gambling disorders in 6th through 12th grade students in Louisiana. This study surveyed 12,066 students in public and non-public schools from 57 parishes during the 1996-1997 school year. Of those students surveyed, 86% reported that they participated in some type of gambling during their lifetime. Of those students surveyed, 10.1% demonstrated Level 2 gambling, or problem gambling, during the past year and 5.9% demonstrated Level 3 gambling, or pathological gambling, during the past year. Additional results of this study pertaining to gambling as well as tobacco, alcohol and other substance abuse can be found in the following tables.

Percentage of LA Students Reporting Ever Gambled, By Age

Age in Years	% ever gambled
10	85.8
11	79.4
12	84.5
13	85.5
14	89.6
15	87.8
16	85.9
17	83.3

Of LA Students Reporting Ever Gambled, the Percentage Demonstrating Level 2 Gambling, By Age

Age in Years	% Level 2
10	6.44
11	11.93
12	10.56
13	11.55
14	12.04
15	8.70
16	8.47
17	8.64

Of LA Students Reporting Ever Gambled, the Percentage Demonstrating Level 3 Gambling, By Age

Age in Years	% Level 3
10	4.4
11	3.7
12	5.1
13	7.5
14	7.9
15	7.3
16	3.6
17	4.3

Of LA Students Reporting Ever Gambled, the Mean Age of First Gambling, By Age

Age in Years	Mean of Onset Gambling
10	7.95
11	9.03
12	9.74
13	10.23
14	10.74
15	11.31
16	11.96
17	12.34

Of LA Students Reporting Ever Drinking, the Mean Age of First Drink, By Age

Age in Years	Mean Age of Onset for First Drink
10	7.28
11	8.50
12	9.41
13	10.19
14	10.70
15	11.62
16	12.15
17	12.64

Of LA Students Reporting Ever Using Marijuana, the Mean Age of First Use, By Age

First Age in Years	Mean Age of Onset for Use of Marijuana
10	9.0
11	9.2
12	10.3
13	11.6
14	12.3
15	13.2
16	13.8
17	14.5

Of LA Students Reporting Ever Smoking, the Mean Age of First Cigarette, By Age

Age in Years	Mean Age of Onset for Smoking Behavior
10	8.33
11	9.26
12	9.85
13	10.61
14	11.2
15	11.95
16	12.42
17	12.79

Nutrition and Exercise

"Pizza, hamburgers, candy...that's what will get teens to come to health centers."
– Adolescent Focus Group Participant

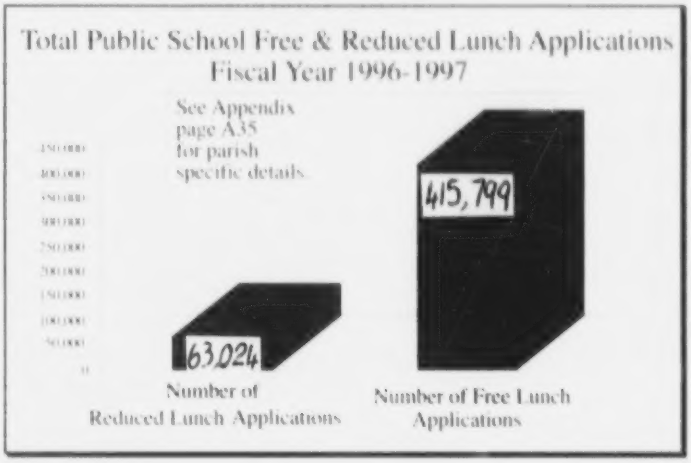
The Food Guide Pyramid, designed by the U.S. Department of Agriculture and the U.S. Department of Health and Human Services, provides recommended daily allowances of foods for people of all ages. This includes:

- 6-11 servings of bread, cereal, rice or pasta
- 2-4 servings of fruits
- 3-5 servings of vegetables
- 2-3 servings of meat, poultry, fish, beans, eggs or nuts
- 2-3 servings of milk, yogurt or cheese
- Sparing portions of fats, oils and sweets

According to the Centers for Disease Control Guidelines for School Health Programs to Promote Lifelong Healthy Eating, the diets of American children and adolescents contain too much fat, sugar and sodium and not enough fruits, vegetables and calcium.[46] In addition, adolescent females consume substantially less iron and calcium than is recommended by the National Research Council.[47]

In addition to numbers of servings of different foods, adolescent girls need an average of 2,200 calories and 73 grams of fat per day. Adolescent boys need an average of 2,500 calories and 83 grams of fat per day.[48] Obesity, anorexia nervosa and bulimia are endemic among American youth, particularly female adolescents and young adults. Dieting, binging and purging, starvation and excessive exercise are all too common among American youth.

Guidelines of the Centers for Disease Control and Prevention's National Center for Chronic Disease Prevention and Health Promotion suggest moderate physical activity for roughly 30 minutes per day most days of the week to significantly reduce the risk of heart disease, diabetes, high blood pressure and some cancers.[49] In addition to reducing the risk of acquiring a potentially life threatening disease, regular physical activity can reduce depression and anxiety, help control weight, help build and maintain healthy bones, muscles and joints and promote overall psychological well-being.


Total Public School Free & Reduced Lunch Applications
Fiscal Year 1996-1997

See Appendix page A35 for parish specific details.

Patterns of physical activity in adulthood are developed in childhood and adolescence. According to the 1996 Report of the Surgeon General on Physical Activity and Health:

- Nearly half of all youths aged 12-21 years are not vigorously active on a regular basis;
- Inactivity is more common among adolescent females than males;
- Daily enrollment in physical education classes dropped from 42% to 25% among high school students between 1991-1995;
- Less than 20% of all high school students engage in 20 minutes of physical activity five days a week in a physical education class.

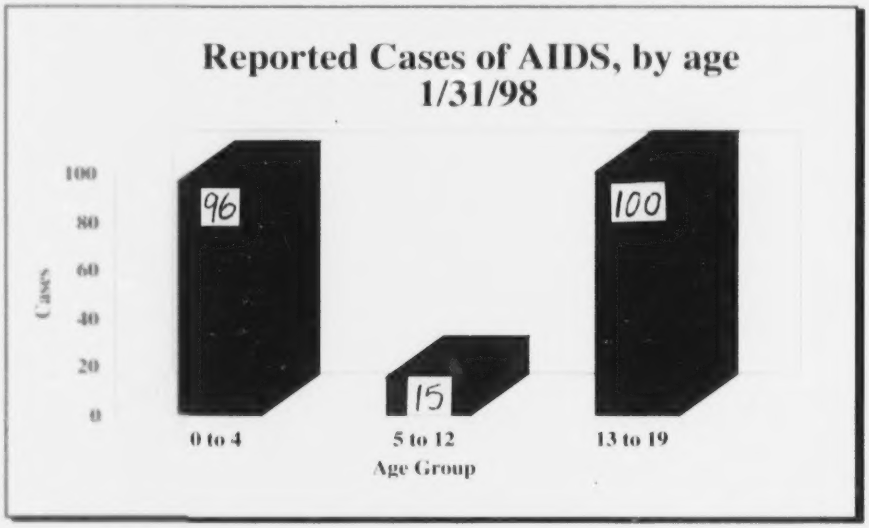
BEST COPY AVAILABLE

Injury

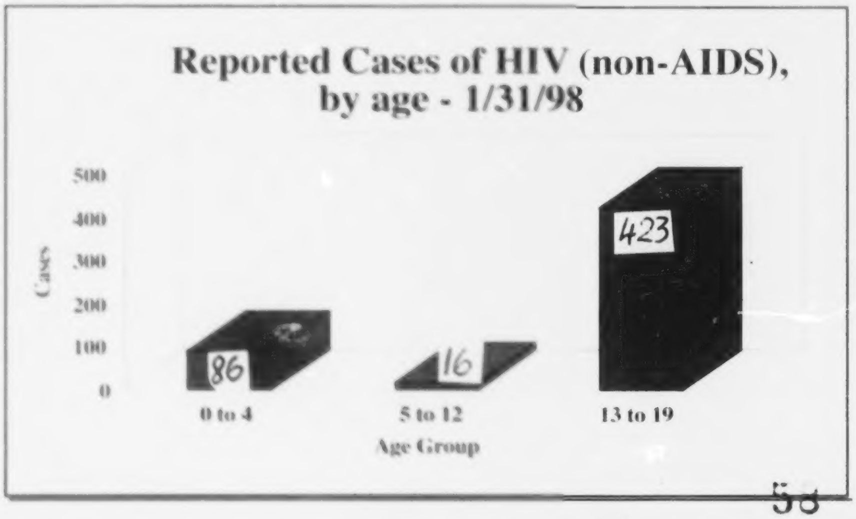
Injury is the leading cause of death for adolescents nationwide, as it accounted for more than 80% of adolescent deaths in 1993. [50] Injuries fall into two categories, intentional and unintentional, and they can cause morbidity, disability or death. Motor vehicle crashes are the number one cause of injuries leading to fatality, causing 28.2% of the unintentional deaths. Deaths due to firearms (27.8%) are the second leading cause of adolescent death due to injury (see ***Violence and Crime** on page 33*). [51]

In Louisiana in 1995, 165 adolescents aged 15-19 died of unintentional injuries, making them the number one cause of adolescent death. Homicide accounted for 111 adolescent deaths, and suicide claimed another 35. Motor vehicle crashes accounted for 175 deaths of adolescents aged 10-19 in 1995. [52] Other accidental deaths include those from fire, drowning and poisoning. See Appendix, pages A39-A40, for age-specific injuries.

HIV/AIDS


Reported Cases of AIDS, by age
1/31/98

Acquired Immune Deficiency Syndrome (AIDS) is caused by the Human Immunodeficiency Virus (HIV). HIV can be transmitted through blood, semen and vaginal fluids. HIV can be transmitted through the use of a contaminated hyperdermic needle or other drug paraphernalia, through heterosexual and homosexual sexual contact, and from an infected mother to her unborn child. HIV does not discriminate by race, gender, geography or age. Adolescents and women of color are the fastest growing groups of HIV-infected people in the U.S., and many people with HIV or AIDS that are in their 20's contracted the virus while they were adolescents.


Reported Cases of HIV (non-AIDS), by age - 1/31/98

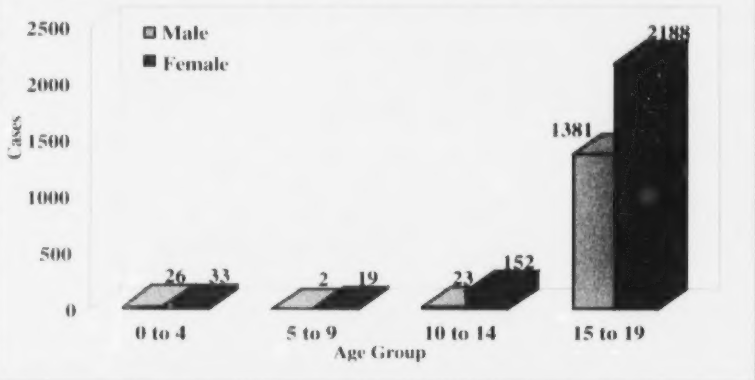
It is estimated that one in four new HIV infections in the U.S. occurs among people under the age of 21. [53] In Louisiana, there have been over 200 cases of AIDS in people under the age of 20, and close to 500 cases of HIV. [54]

BEST COPY AVAILABLE

Sexually Transmitted Diseases

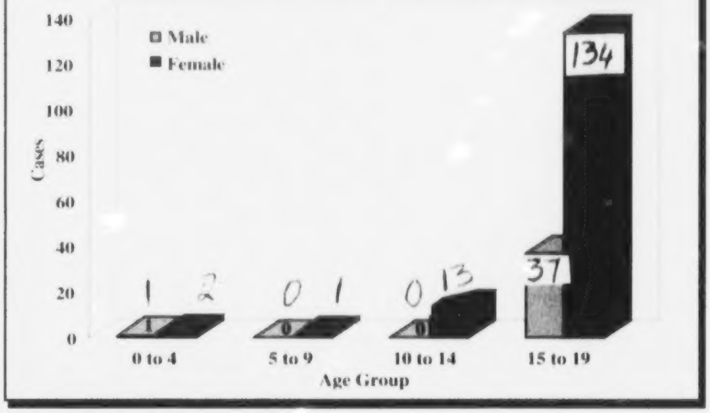
According to the Centers for Disease Control, roughly two-thirds of the 12 million cases of sexually transmitted diseases (STDs) that occur in the U.S. each year occur in individuals under the age of 25.[55] STDs are predominantly spread through sexual contact, although HIV and Hepatitis B can be spread through contact with infected blood. STDs can cause painful or uncomfortable symptoms, or they can cause no symptoms at all. Most STDs can be cured with antibiotics, although some cannot be cured. Common STDs include chlamydia, gonorrhea, genital warts, hepatitis B, herpes, syphilis and vaginitis. Adolescents are at higher risk of contracting an STD than their adult counterparts because they: 1) may be more likely to have multiple sexual partners; 2) may be more likely to engage in unprotected sexual intercourse; and 3) may be more likely to select partners who are at higher risk.[56]

Reported Cases of Gonorrhea, by age in Louisiana STD Annual Report, 1997

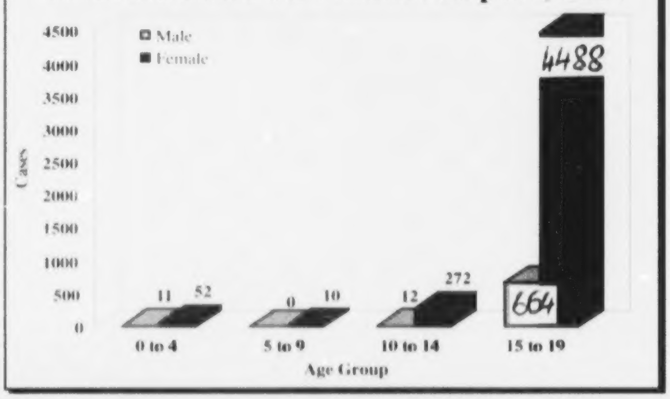


Chlamydia and gonorrhea are the most common STDs among Louisiana adolescents today. In the March-April 1997 Louisiana Morbidity Report, it was reported that the age group with the highest rates of gonorrhea are 15-19 year olds.[57] Gonorrhea was reported in close to 3,700 adolescents aged 10-19 in Louisiana, and chlamydia was reported in over 4,800. In addition, there were close to 500 cases of syphilis among adolescents aged 10-19 in 1995.[58]

Reported Cases of Syphilis, by age in Louisiana STD Annual Report, 1997



Reported Cases of Chlamydia, by age in Louisiana STD Annual Report, 1997



BEST COPY AVAILABLE

Teenage Pregnancy

"You have a baby at an early age, that's messing up your life."
– Adolescent Focus Group Participant

The consequences of early childbearing impact both the mother and the child. Babies born to young mothers are more likely to be of low birth weight, have serious health problems, and be hospitalized more frequently than are babies born to older mothers.[59] Nationally, only 50% of teen mothers ever complete high school and, overall, women who were teen mothers earn half the lifetime income of women who gave birth in their twenties.[60] With one out of five births to adolescent girls, Louisiana ranks second in the nation with the highest percentage of births to teens. See Appendix page A41 for parish-specific details. Two-thirds of fathers of babies born to Louisiana adolescent mothers are 20 years old or older.[61]

A web of personal, family and societal risk factors contribute to adolescent pregnancy and childbearing, as well as a myriad of other adolescent health problems such as violence, drug and alcohol use, unintentional injury, tobacco use, sexually transmitted diseases (including HIV), school dropout, depression and emotional disorders.

Personal risk factors include:
Low expectations for educational achievement
School failure
Lack of regular school attendance
Peer influence
Lack of connectedness or affiliation
History of abuse, particularly sexual abuse
Involvement in other high-risk activities, such as alcohol or drug use

Family risk factors include:
Low income
Low level of parental education
Poor communication skills, particularly with teens
Lack of support for adolescent children
Mother was a teen parent
Abusive relationships, particularly sexual abuse

Societal risk factors include:
Poverty
High rates of unemployment
Poor living conditions and a lack of adequate housing
Inadequate educational opportunities and low levels of literacy
Institutionalized racism and gender bias

Abstinence is the only method that is 100% effective in preventing teenage pregnancies. There is no such thing as risk-free sex. Having sex means facing up to the possibilities of STDs and pregnancy. A holistic approach to addressing teenage pregnancy must: 1) focus on the whole individual and his/her entire environment; 2) involve both the public and private sectors, including adolescent opinions and recommendations; 3) be innovative; 4) be community centered; 5) be collaborative and interdisciplinary; and 6) be long term and sustainable.[62]

[36] Centers for Disease Control & Prevention. CDC Surveillance Summaries, ***MMWR***, August 14, 1998;47 (No. SS-3).

[37] Ibid., 1995.

[38] *Child Health USA '95.* Maternal and Child Health Bureau, Health Resources and Services Administration, Public Health Service, U.S. Department of Health and Human Services, Washington, D.C., p. 48.

[39] Ibid., p. 48.

[40] Louisiana Takes A Stand Fact Sheet, Abbeville, LA.

[41] Food and Drug Administration. (1995). *Child and tobacco: The facts.* FDA Press Office, press release date: August 10, 1995.

[42] Centers for Disease Control and Prevention. (1995). Trends in smoking for selected tobacco-use behaviors – United States, 1900-1994. Mortality and Morbidity Weekly Report, Vol. 43 (SS-3).

[43] U.S. Department of Health and Human Services. (1994). *Preventing tobacco use among young people: A report of the Surgeon General.* (DHHS Publication No. S/N 017-001-00491-0). Washington, D.C.: U.S. Government Printing Office.

[44] Pierce, J. and Gilpin, E. (1995). How long will today's new adolescent smoker be addicted to cigarettes? American Journal of Public Health, 86(2), 95-100.

[45] U.S. Department of Health and Human Services. *National household survey on drug abuse: Main findings 1991.* Public Health Services, Substance Abuse and Mental Health Services Administration, Office of Applied Studies. (DHHS Publication No. (SMA) 93-1980, 1993). Washington, D.C.: U.S. Government Printing Office. (From USDHHS. Preventing tobacco use among young people: A report of the Surgeon General, 1994)

[46] Guidelines for School Health Programs to Promote Lifelong Healthy Eating. Morbidity and Mortality Weekly Report, USDHHS, PHS, Centers for Disease Control, June 14, 1996, Vol. 45, No. RR-9, Atlanta.

[47] Ibid., 1996.

[48] *The Food Pyramid Booklet,* U.S. Department of Agriculture, Human Nutrition Information Service, Maryland.

[49] Information Packet, CDC's National Physical Activity Initative, National Center for Chronic Disease Prevention and Health Promotion, Centers for Disease Control, U.S. Department of Health and Human Services.

[50] *Child Health USA '95,* U.S. Department of Health and Human Services, Public Health Service, Health Resources & Services Administration, Maternal & Child Health Bureau, Rockville, MD, September 1996.

[51] Ibid., 1996.

[52] *Special Report of the Children's Defense Fund, Child Health Day 1996 Violence Prevention Packet,* USDHHS, Health Resources and Services Administration, Maternal & Child Health Bureau, Rockville, MD, September 1996.

[53] *Youth & HIV/AIDS: An American Agenda. A Report to the President,* Office of National AIDS Policy, Washington, DC, March 1996.

[54] Surveillance Report: 4/30/97, HIV Surveillance Office, Office of Public Health.

[55] Youth & HIV/AIDS: An American Agenda, A Report to the President, Office of National AIDS Policy, Washington, DC, March 1996.

[56] *Sexually Transmitted Disease Surveillance 1995*. Centers for Disease Control and Prevention, Public Health Service, U.S. Department Health and Human Services, Atlanta.

[57] Louisiana Morbidity Report, 8(2) March-April 1997, Louisiana Office of Public Health.

[58] Data Report, Communicable Disease Control Section, Louisiana Office of Public Health.

[59] Children Having Children, Child Welfare League of America, 1987.

[60] Ibid., 1987.

[61] Center for Health Information and Statistics, Louisiana Office of Public Health.

[62] Teen Pregnancy in Louisiana Slide Presentation, Louisiana Adolescent Health Initiative, Louisiana Office of Public Health, 1997.

Chapter Eight

Infectious Diseases

Infectious Diseases

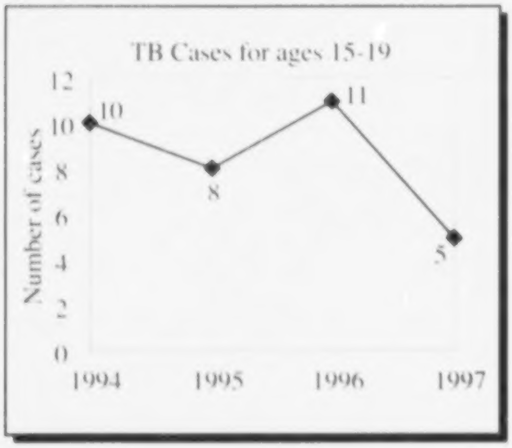
"Teens don't know the consequences of unsafe sex...because if they did they would think about their actions."

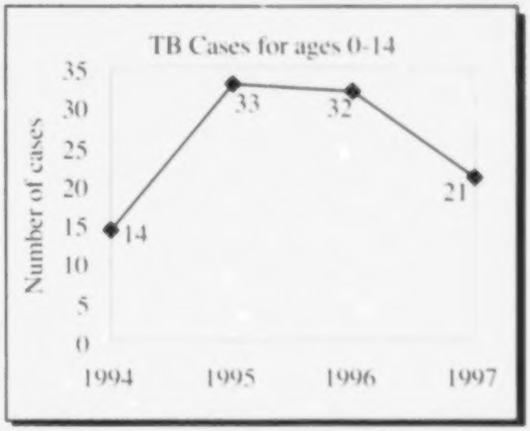
– Adolescent Focus Group Participant

Hepatitis B

Hepatitis B is a disease of the liver caused by a virus which can be spread through blood, sexual contact, and from a mother to her newborn baby. The hepatitis B virus causes an illness with symptoms of a loss of appetite, vomiting, abdominal pain, fever, headache, rash, joint pain, dark urine, jaundice, liver enlargement and fatigue. About 10% of people infected with the virus will become long-term carriers of the infection and can spread the disease to others for the rest of their lives. These carriers are also at high risk of developing liver cancer or liver failure.

Hepatitis B can be prevented by vaccination. The hepatitis B vaccine is now required for entry into the school system, and it is also recommended for all adolescents at high risk of infection. This includes adolescents who are developmentally disabled, on dialysis for kidney failure, are sexually active, use injectable drugs, or who are household contacts of hepatitis B carriers.[63]





Tuberculosis

Tuberculosis (TB) is a disease caused by bacteria which are spread from person-to-person through the air when a person with active TB coughs. TB most commonly affects the lungs, but it can also cause disease of the lymph nodes, kidneys, bones, brain and other parts of the body. Individuals with active TB have a cough that gradually gets worse over weeks or months, fever, chest pain, weight loss, fatigue and night sweats. TB can be treated and cured. Treatment takes 6-12 months and requires several special antibiotics.

Overall, TB has decreased in Louisiana over the past year, but it has increased in children and adolescents. It is important for children and adolescents who have been exposed to an adult with active TB to be screened for infection and take preventive treatment if they have been infected. Preventive treatment decreases the chances that a person who has been infected with this bacteria will develop active tuberculosis. Certain groups are at high risk of TB infection, including individuals who are homeless, inject drugs, infected with HIV, or are close contacts of people with active tuberculosis.[64]

Dental Disease

Dental Caries (cavities) or tooth decay is one of the most common diseases seen in children as well as adults. Cavities are caused by bacteria, which make acids that irreversibly destroy the hard surfaces of the tooth. Cavities do not heal themselves, do not respond to medicine, and can cause pain, bad breath, faulty chewing, improper digestion and tooth loss. People of all ages can be affected regardless of race, sex or socioeconomic status. In the United States, it is estimated that 84% of children and 96% of adults will have cavities sometime in their lifetime. Many adolescents with decayed or missing teeth suffer embarrassment and diminished self-esteem. In addition, it is very costly. An estimated 5% of personal health care costs are spent on dental services.

In 1996, the Oral Health Program at the Office of Public Health did a study to assess the oral health status of school-aged children including adolescents. A convenience sample consisting of eight schools with school-based health clinics participated. Seventy-one 15-year olds from four high schools were included in the study.

Of the 15-year olds examined, 75% had untreated dental caries. Only 10% were completely caries-free. In addition, there were a higher percentage of children with untreated caries in schools that did not have fluoridated water compared to children in schools with fluoridated water.

Findings from this study indicate that access to dental services is difficult for many families, and that access to effective preventive services also remains low.

Several effective measures do exist to prevent tooth decay. In addition to routine brushing and flossing, sealants and community water fluoridation can prevent this disease.

A dental sealant is a thin plastic coating placed atop the biting surfaces of teeth in the back of the mouth. The sealant drips into the grooves between teeth and a protective layer or barrier is formed.

Community Water Fluoridation

Community water fluoridation is, however, the most effective means of preventing tooth decay:

- *Fluoridation is effective*
  Water fluoridation results in up to 60% less decay in baby teeth and up to 35% less decay in adult teeth.

- *Fluoridation is safe*
  Over 50 years of research and practical experience have shown that there are no harmful effects to humans, animals or the environment from optimally fluoridated water systems.

- *Fluoridation is cost effective*
  For every $1 spent on fluoridation, $50 in dental expense is saved.

In Louisiana, however, only 56% of residents currently benefit from fluoridated water systems.

Sport Injuries of the Mouth

Sport injuries are common in the teenage years but with the proper use of safety equipment, can be avoided. Mouth guards should be used in all team sports as well as wrestling. A mouth guard is a soft, horseshoe-shaped plastic that protects the teeth, lips, gums and cheeks from injuries. Mouth guards prevent an estimated 200,000 injuries a year.[65]

State of Louisiana Department of Health and Hospitals
Office of Public Health - Oral Health Program (504) 568-5073

Utilization and Average Reimbursement for Medicaid EPSDT Eligible Children, Louisiana July 1995 - July 1996

Age Group	Utilization rate	Average Cost per visit
0-1	0.01	$50
1-2	0.13	101
2-3	0.30	160
3-4	0.51	157
4-5	0.55	135
5-6	0.51	139
6-7	0.54	143
7-8	0.54	146
8-9	0.53	140
9-10	0.52	124
10-11	0.51	110
11-12	0.47	111
12-13	0.44	132
13-14	0.42	148
14-15	0.40	158
15-16	0.42	166
16-17	0.41	177
17-18	0.40	178
18-19	0.39	191
19-20	0.39	202

Utilization rate = number of children who visited dentist / number eligible

Average cost per visit = total cost / number of children who visited dentist

---

[63] Office of TB Control, Office of Public Health.

[64] Office of TB Control, Office of Public Health.

[65] Sutherland, J. Louisiana Oral Health Program. Oral Health. 1997. <http://www.tulane.edu/~oralhlth/oral.htm> (May 24, 1997).

Appendix A

Charts & Graphs

List of Figures

Section ONE: Adolescent Development & Population Figures

Page
1.1 Total Population for White Males in Louisiana, By Parish, Age 0 to 24 .... A3
1.2 Total Population for White Females in Louisiana, By Parish, Age 0 to 24 .... A4
1.3 Total Population for Black Males in Louisiana, By Parish, Age 0 to 24 .... A5
1.4 Total Population for Black Females in Louisiana, By Parish, Age 0 to 24 .... A6
1.5 Total Population for Other Males in Louisiana, By Parish, Age 0 to 24 .... A7
1.6 Total Population for Other Females in Louisiana, By Parish, Age 0 to 24 .... A8

Section TWO: Economic Status

2.1 Number of Adolescents Receiving TANF, Age 21 and younger A10
2.2 Number of Children in Foster Care, By Race A12
2.3 Population Income Figures & Total Unemployment Figures, By Parish A13
2.4 Employment Status Characteristics for 1990 Census Data, By Parish A14

Section THREE: Educational Status

3.1 Two-Year Comparison of General Education Student Count A16
3.2 Number of Public Education Students, By Ethnic Group A18
3.3 Number of Registered Students in Non-Public Schools, By Race and Gender A20
3.4 Number of Registered Gifted & Talented Students, By Gender A22
3.5 Number of Registered Gifted & Talented Students, By Ethnic Group A23
3.6 Individuals with Disabilities Education Act, By Age Group A24
3.7 Number of Students with Disabilities, By Ethnic Group A26
3.8 Per Pupil Expenditure, By Parish in Louisiana Public Schools A28

Section FOUR: Mental Health, Crime & Violence

4.1 Mental Health Services Delivered by Community Mental Health Centers A29
4.2 Number of Sexual Abuse Cases Found Valid, By Race A30
4.3 Number of Physical Abuse Cases Found Valid, By Race A31
4.4 Number of Neglect Cases Found Valid, By Race A32
4.5 Population by Adjudicated Offense As of 12/31/97, By Offense A33
4.6 Population by Adjudicated Offense As of 12/31/97, By Parish A34

Section FIVE: Homeless Adolescents

5.1 Number of Homeless Students Enrolled in Louisiana Public Schools, 1997 .... A36

Section SIX: Risk Behaviors

6.1 Percent of Free and Reduced Lunch Applications in Public Schools A38
6.2 Number of Reported Drownings, By Age Group A39
6.3 Number of Reported Deaths by Falls, By Age Group A39
6.4 Number of Reported Motor Vehicle Deaths, By Age Group A40
6.5 Number of Reported Fire & Burn Deaths, By Age Group A40
6.6 Number of Reported Poisoning Deaths, By Age Group A40

Section SEVEN: Infectious Diseases

7.1 Percent of Births to Teenage Mothers Age <20, By Race A41

Figure 1.1
Total Population for White Males in Louisiana, by Parish, Age 0 to 24 years old
1996 Estimates Using 1990 Census Figures

Parish	<5	5 to 9	10 to 14	15 to 19	20 to 24
Total	96133	99402	107248	109050	98858
Acadia	1747	1843	1930	1771	1322
Allen	551	581	673	645	525
Ascension	1903	2124	2254	2104	1612
Assumption	497	547	645	612	486
Avoyelles	867	956	1088	1081	791
Beauregard	944	968	1098	1072	869
Bienville	247	300	319	339	223
Bossier	2557	2547	2603	2604	2307
Caddo	4094	4104	4516	4563	3928
Calcasieu	4592	4916	5287	5105	4362
Caldwell	289	272	359	349	210
Cameron	309	319	338	337	247
Catahoula	267	289	342	310	200
Claiborne	225	266	296	272	211
Concordia	404	455	525	480	342
DeSoto	395	418	466	487	311
E.Baton Rouge	7645	7679	7757	9372	10741
E.Carroll	96	82	103	111	81
E.Feliciana	352	353	397	422	320
Evangeline	820	938	1082	987	647
Franklin	419	485	561	563	407
Grant	562	612	640	613	450
Iberia	1758	1868	2008	1891	1486
Iberville	508	549	605	579	517
Jackson	312	366	424	393	307
Jefferson	11166	11037	11988	12366	11428
Jeff. Davis	883	947	1095	1015	697
Lafayette	5114	4984	4910	5121	4994
Lafourche	2627	2710	2962	2937	2912
LaSalle	342	430	477	467	321
Lincoln	687	745	778	1451	1883
Livingston	2984	3362	3633	3306	2390
Madison	107	148	172	194	144
Morehouse	567	568	670	680	488
Natchitoches	673	714	811	1264	1027
Orleans	3570	3251	3220	4589	5770
Ouachita	3035	3042	3625	3929	3835
Plaquemines	681	754	802	712	660
Point Coupee	412	530	494	467	371
Rapides	2878	2997	3295	3152	2685
Red River	194	213	211	205	158
Richland	359	411	509	469	338
Sabine	601	612	692	641	497
St. Bernard	2184	2118	2464	2290	1977
St. Charles	1434	1425	1417	1146	959
St. Helena	163	157	171	155	130
St. James	327	389	402	333	322
St. John	1095	1187	1087	873	735
St. Landry	1689	1767	1899	1792	1235
St. Martin	1114	1163	1281	1152	963
St. Mary	1265	1388	1431	1450	1145
St. Tammany	5899	6224	6692	6011	3547
Tangipahoa	2035	2279	2646	2808	2469
Tensas	80	89	124	120	68
Terrebonne	3013	3087	3391	3000	2530
Union	418	472	581	532	412
Vermilion	1483	1750	1856	1643	1197
Vernon	1837	1324	1395	2146	4970
Washington	800	1006	1154	1094	775
Webster	807	880	1045	1002	695
W.Baton Rouge	488	501	485	513	405
W.Carroll	288	352	426	392	254
W.Feliciana	147	180	205	190	185
Winn	327	372	436	381	385

Figure 1.2
Total Population for White Females in Louisiana, by Parish, Age 0 to 24 years old
1996 Estimates Using 1990 Census Figures

Parish	<5	5 to 9	10 to 14	15 to 19	20 to 24
Total	91266	94790	101982	104961	97043
Acadia	1668	1803	2034	1892	1438
Allen	536	568	627	621	434
Ascension	1758	1928	2207	1918	1740
Assumption	508	498	647	540	503
Avoyelles	831	961	1082	970	787
Beauregard	930	906	1051	1017	755
Bienville	263	285	292	297	227
Bossier	2477	2370	2498	2580	2280
Caddo	3918	3981	4347	4413	4062
Calcasieu	4408	4737	4985	4927	4291
Caldwell	241	247	338	295	247
Cameron	321	340	359	286	245
Catahoula	249	278	353	263	219
Claiborne	218	264	284	241	155
Concordia	383	412	493	470	331
DeSoto	398	417	440	432	317
E.Baton Rouge	7217	7373	7609	9693	10936
E.Carroll	80	90	114	93	64
E.Feliciana	309	349	378	348	270
Evangeline	849	861	968	915	695
Franklin	429	455	570	562	401
Grant	518	547	615	620	452
Iberia	1770	1771	1850	1803	1582
Iberville	485	499	562	526	505
Jackson	294	340	425	362	296
Jefferson	10503	10521	11462	11981	12239
Jeff. Davis	847	929	1058	988	694
Lafayette	4945	4875	4843	4834	5243
Lafourche	2453	2578	2803	2866	2985
LaSalle	348	422	488	435	323
Lincoln	623	669	717	1329	1306
Livingston	2738	3013	3369	3180	2510
Madison	147	134	201	189	115
Morehouse	478	558	630	607	457
Natchitoches	568	636	759	1390	962
Orleans	3535	3029	2951	4709	5440
Ouachita	2861	2977	3310	3913	3958
Plaquemines	665	700	697	641	583
Point Coupee	394	432	496	435	355
Rapides	2825	2929	3124	3064	2765
Red River	174	203	183	188	151
Richland	348	402	476	492	317
Sabine	557	603	637	575	490
St. Bernard	2005	2102	2279	2283	2094
St. Charles	1352	1334	1381	1078	975
St. Helena	149	146	157	151	148
St. James	341	357	388	352	334
St. John	1111	1170	1026	868	749
St. Landry	1504	1729	1885	1702	1308
St. Martin	1045	1077	1189	1111	1032
St. Mary	1277	1330	1331	1282	1107
St. Tammany	5261	5823	6299	5541	3786
Tangipahoa	2012	2135	2388	2810	2398
Tensas	99	94	111	95	69
Terrebonne	2736	3124	3279	2948	2705
Union	425	471	544	530	363
Vermilion	1408	1571	1695	1509	1268
Vernon	1724	1312	1301	1461	2081
Washington	820	921	1050	1048	738
Webster	781	886	943	943	698
W.Baton Rouge	408	457	447	428	469
W.Carroll	276	353	384	370	219
W.Feliciana	156	182	192	171	91
Winn	309	326	381	380	286

Figure 1.3
Total Population for Black Males in Louisiana, by Parish, Age 0 to 24 years old 1996
Estimates Using 1990 Census Figures

Parish	<5	5 to 9	10 to 14	15 to 19	20 to 24
Total	67380	66856	69412	70509	55337
Acadia	615	616	646	551	371
Allen	214	199	251	251	306
Ascension	885	871	889	920	612
Assumption	359	397	417	366	286
Avoyelles	556	615	538	559	589
Beauregard	219	223	256	257	305
Bienville	348	351	334	321	257
Bossier	1034	1071	975	1011	757
Caddo	5075	5040	5352	5185	3451
Calcasieu	2074	2151	2237	2240	1486
Caldwell	89	80	100	106	66
Cameron	21	27	19	26	19
Catahoula	148	164	159	159	107
Claiborne	313	317	337	367	493
Concordia	338	385	456	382	268
DeSoto	495	465	537	518	387
E.Baton Rouge	7070	6866	6832	7897	6526
E.Carroll	336	329	388	334	219
E.Feliciana	445	477	490	484	550
Evangeline	554	469	496	512	377
Franklin	380	381	441	436	256
Grant	126	141	152	114	88
Iberia	1210	1157	1304	1102	787
Iberville	718	700	668	725	625
Jackson	190	230	254	244	122
Jefferson	4341	4455	4524	4495	3203
Jeff. Davis	319	341	363	297	201
Lafayette	2226	2187	2149	2194	2007
Lafourche	677	681	620	648	491
LaSalle	69	56	77	75	42
Lincoln	629	634	597	1306	1564
Livingston	245	249	274	251	148
Madison	431	375	498	485	321
Morehouse	657	754	782	736	484
Natchitoches	755	813	782	818	618
Orleans	13826	13292	14019	15000	11337
Ouachita	2648	2382	2658	2877	1931
Plaquemines	306	311	348	341	274
Point Coupee	449	495	489	487	338
Rapides	1694	1916	1961	1780	1400
Red River	195	231	201	184	120
Richland	421	429	471	409	256
Sabine	238	260	250	218	132
St. Bernard	143	137	167	170	124
St. Charles	625	611	632	582	420
St. Helena	256	250	272	263	187
St. James	527	541	537	510	446
St. John	891	874	900	730	535
St. Landry	1761	1843	1878	1725	1237
St. Martin	877	855	803	800	553
St. Mary	986	983	1086	1017	686
St. Tammany	1058	1037	1183	995	668
Tangipahoa	1458	1544	1718	1504	1096
Tensas	182	183	196	186	111
Terrebonne	978	965	947	928	674
Union	334	320	332	286	235
Vermilion	443	414	402	332	278
Vernon	814	568	437	584	1708
Washington	594	642	729	680	515
Webster	618	618	712	619	487
W.Baton Rouge	356	350	364	368	290
W.Carroll	137	112	102	100	85
W.Feliciana	203	192	181	204	424
Winn	201	234	243	258	401

Figure 1.4

Total Population for Black Females in Louisiana, by Parish, Age 0 to 24 years old

1996 Estimates Using 1990 Census Figures

Parish	≤5	5 to 9	10 to 14	15 to 19	20 to 24
Total	66262	64988	68074	70723	59398
Acadia	569	587	605	518	454
Allen	216	201	215	240	183
Ascension	869	862	918	861	717
Assumption	349	409	434	384	333
Avoyelles	587	586	526	537	431
Beauregard	199	219	197	228	158
Bienville	324	342	297	311	278
Bossier	1111	960	1037	984	853
Caddo	5022	4904	5157	5123	3870
Calcasieu	1958	2047	2172	2082	1589
Caldwell	67	81	89	114	53
Cameron	30	21	24	23	11
Catahoula	146	152	168	144	120
Claiborne	336	296	312	333	320
Concordia	365	399	453	387	292
DeSoto	483	517	521	479	398
E.Baton Rouge	6676	6597	6701	7856	7294
E.Carroll	333	320	352	352	241
E.Feliciana	453	442	422	431	335
Evangeline	542	521	509	420	438
Franklin	344	350	429	419	287
Grant	149	143	132	122	112
Iberia	1142	1140	1246	1017	949
Iberville	740	731	632	670	648
Jackson	160	186	249	223	161
Jefferson	4379	4213	4499	4303	3614
Jeff. Davis	316	325	347	312	215
Lafayette	2204	2099	2136	2446	2145
Lafourche	717	664	610	638	577
LaSalle	68	69	61	73	53
Lincoln	604	556	637	1730	1845
Livingston	228	263	277	253	202
Madison	367	404	441	442	279
Morehouse	639	658	811	774	554
Natchitoches	780	770	761	825	691
Orleans	13822	12922	13927	15707	12905
Ouachita	2632	2515	2556	2766	2307
Plaquemines	300	303	343	304	271
Point Coupee	421	475	533	469	382
Rapides	1720	1817	1971	1831	1451
Red River	212	221	211	180	163
Richland	382	428	487	392	300
Sabine	242	241	243	235	169
St. Bernard	178	159	149	181	166
St. Charles	626	604	627	596	536
St. Helena	231	258	263	230	229
St. James	527	531	551	502	476
St. John	762	906	835	784	579
St. Landry	1659	1695	1793	1731	1374
St. Martin	837	859	781	771	714
St. Mary	1022	1011	1037	902	791
St. Tammany	1031	1011	1137	1028	755
Tangipahoa	1449	1545	1643	1554	1190
Tensas	168	211	212	204	106
Terrebonne	1006	955	970	1000	743
Union	281	262	310	284	250
Vermilion	434	420	393	328	316
Vernon	716	523	367	443	814
Washington	609	640	746	688	462
Webster	644	585	645	689	496
W.Baton Rouge	339	365	401	363	292
W.Carroll	110	108	115	102	105
W.Feliciana	181	176	196	170	187
Winn	249	208	255	235	169

Figure 1.5
Total Population for Other Males in Louisiana, by Parish, Age 0 to 24 years old
1996 Estimates Using 1990 Census Figures

Parish	<5	5 to 9	10 to 14	15 to 19	20 to 24
Total	3438	3186	3546	3490	3236
Acadia	7	4	6	7	2
Allen	8	8	19	16	12
Ascension	18	14	12	24	9
Assumption	6	9	8	10	3
Avoyelles	11	8	6	8	5
Beauregard	7	10	14	10	17
Bienville	1	1	0	0	2
Bossier	46	49	57	69	57
Caddo	69	56	59	83	80
Calcasieu	51	35	48	56	38
Caldwell	1	1	1	1	2
Cameron	4	2	2	1	1
Catahoula	0	0	1	1	2
Claiborne	1	2	2	1	2
Concordia	1	2	2	0	3
DeSoto	1	1	2	6	3
E.Baton Rouge	342	272	312	410	598
E.Carroll	2	0	3	1	0
E.Feliciana	2	1	4	2	2
Evangeline	3	4	1	3	0
Franklin	6	1	5	0	1
Grant	3	6	6	8	4
Iberia	73	89	75	72	36
Iberville	2	4	5	3	4
Jackson	2	0	0	4	3
Jefferson	675	651	763	699	447
Jeff. Davis	6	6	11	10	3
Lafayette	108	76	91	103	287
Lafourche	148	170	201	176	103
LaSalle	5	11	9	9	2
Lincoln	21	11	10	30	70
Livingston	16	9	8	7	13
Madison	2	1	0	1	1
Morehouse	0	2	5	2	3
Natchitoches	9	14	15	48	17
Orleans	688	563	618	551	502
Ouachita	36	29	51	66	109
Plaquemines	58	57	82	64	39
Point Coupee	0	1	6	4	2
Rapides	66	62	93	62	46
Red River	1	1	0	1	1
Richland	1	1	0	1	2
Sabine	27	31	41	31	20
St. Bernard	58	41	56	49	37
St. Charles	14	24	23	15	3
St. Helena	0	1	0	3	0
St. James	0	2	1	1	0
St. John	24	16	8	12	4
St. Landry	15	16	21	11	3
St. Martin	22	39	48	22	19
St. Mary	154	145	117	94	69
St. Tammany	94	87	81	63	50
Tangipahoa	33	28	18	21	24
Tensas	1	0	1	2	1
Terrebonne	312	356	362	339	202
Union	1	0	2	0	1
Vermilion	62	69	75	68	28
Vernon	101	71	61	109	227
Washington	5	9	3	6	5
Webster	2	2	5	1	1
W.Baton Rouge	2	3	3	4	3
W.Carroll	0	0	3	4	0
W.Feliciana	1	0	1	1	3
Winn	3	2	3	4	3

Figure 1.6
Total Population for Other Females in Louisiana, by Parish, Age 0 to 24 years old
1996 Estimates Using 1990 Census Figures

Parish	<5	5 to 9	10 to 14	15 to 19	20 to 24
Total	3282	2967	3368	3467	3322
Acadia	5	6	12	6	4
Allen	8	13	14	21	10
Ascension	16	10	17	24	19
Assumption	8	13	10	6	5
Avoyelles	5	6	1	7	3
Beauregard	11	13	15	22	11
Bienville	0	1	0	3	3
Bossier	59	60	61	82	82
Caddo	63	58	78	89	95
Calcasieu	47	37	52	65	55
Caldwell	1	0	1	1	0
Cameron	0	2	1	3	0
Catahoula	1	1	0	1	0
Claiborne	1	3	0	0	0
Concordia	4	3	3	3	2
DeSoto	1	4	3	1	2
E.Baton Rouge	251	230	265	348	463
E.Carroll	3	1	2	0	0
E.Feliciana	4	0	1	2	2
Evangeline	3	7	7	2	3
Franklin	4	2	5	2	0
Grant	3	9	8	13	8
Iberia	70	71	87	67	46
Iberville	1	5	1	1	2
Jackson	1	3	1	2	2
Jefferson	700	582	691	708	570
Jeff. Davis	9	2	6	1	7
Lafayette	81	89	100	91	151
Lafourche	143	158	210	179	127
LaSalle	6	7	7	7	6
Lincoln	8	12	7	17	51
Livingston	11	6	18	27	16
Madison	0	1	0	1	1
Morehouse	4	3	3	6	6
Natchitoches	11	7	14	43	22
Orleans	648	549	551	610	639
Ouachita	36	38	46	51	111
Plaquemines	65	42	65	55	49
Point Coupee	0	3	3	1	0
Rapides	79	42	61	70	79
Red River	1	0	0	1	3
Richland	0	1	2	1	1
Sabine	22	30	39	31	16
St. Bernard	40	42	60	56	46
St. Charles	25	16	16	12	7
St. Helena	0	0	1	2	0
St. James	1	0	2	1	0
St. John	18	21	16	4	8
St. Landry	9	15	17	14	6
St. Martin	26	28	33	32	19
St. Mary	138	134	119	89	65
St. Tammany	93	65	74	75	43
Tangipahoa	17	21	22	26	16
Tensas	1	0	0	1	0
Terrebonne	316	340	390	342	253
Union	1	2	0	1	2
Vermilion	59	61	55	50	34
Vernon	122	76	77	71	140
Washington	6	5	2	5	0
Webster	4	2	6	6	7
W.Baton Rouge	3	4	4	1	2
W.Carroll	3	0	0	0	1
W.Feliciana	3	3	0	2	1
Winn	3	2	6	6	0

Figure 2.1
The Number of People Receiving TANF (Temporary Assistance to Needy Families), Age 21 and Younger. Data for end of the 1997 Fiscal Year

Parish	White Male	White Female	Black Male	Black Female	Other Male	Other Female	TOTAL
Total	6100	6858	41916	49171	761	835	105641
Acadia	158	149	365	422	4	6	1104
Allen	63	61	83	109	4	2	322
Ascension	86	67	425	500	8	12	1098
Assumption	24	34	193	241	0	0	492
Avoyelles	119	143	368	381	6	4	1021
Beauregard	92	92	113	104	2	4	407
Bienville	30	36	214	241	0	2	523
Bossier	120	122	336	419	3	5	1005
Caddo	194	225	2683	3064	19	17	6202
Calcasieu	237	281	690	788	9	7	2012
Caldwell	37	60	47	60	2	3	209
Cameron	3	8	4	5	0	0	20
Catahoula	21	34	100	124	0	0	279
Claiborne	24	9	228	249	0	3	513
Concordia	35	34	281	394	1	1	746
DeSoto	35	42	307	391	0	0	775
East Baton Rouge	217	211	3859	4280	37	58	8662
East Carroll	12	13	368	453	1	0	847
East Feliciana	25	26	163	159	0	0	373
Evangeline	123	129	522	615	4	2	1395
Franklin	34	28	247	275	8	5	597
Grant	88	88	72	101	1	0	350
Iberia	117	155	679	840	37	49	1877
Iberville	50	58	376	461	7	6	958
Jackson	18	40	121	137	0	0	316
Jefferson - East Bank	209	232	543	640	38	38	1700
Jefferson - West Bank	518	577	2235	2584	114	117	6145
Jefferson Davis	51	63	66	98	5	4	287
Lafayette	160	182	679	799	16	15	1851
Lafourche	187	199	493	552	27	17	1475
LaSalle	42	51	23	32	3	1	152
Lincoln	41	47	413	460	2	3	966

Parish	White Male	White Female	Black Male	Black Female	Other Male	Other Female	TOTAL
Livingston	144	130	80	94	3	3	454
Madison	6	13	296	366	5	1	687
Morehouse	39	53	353	422	0	1	868
Natchitoches	78	81	410	482	3	4	1058
Orleans - Algiers	46	59	1527	1830	32	44	3538
Orleans - Downtown	30	33	2388	2810	23	16	5300
Orleans - Gentilly	50	51	2229	2656	89	98	5173
Orleans - Midtown	67	69	3269	3869	38	39	7351
Orleans - Uptown	21	48	3772	4662	11	15	8529
Ouachita	151	193	1705	1958	5	1	4013
Plaquemines	66	85	190	208	44	43	636
Pointe Coupe	37	41	250	346	3	5	682
Rapides	202	213	1072	1309	12	7	2815
Red River	16	23	110	130	0	0	279
Richland	62	72	335	358	1	1	829
Sabine	64	53	154	166	5	2	444
St. Bernard	219	225	81	106	14	17	662
St. Charles	62	53	224	296	3	3	641
St. Helena	16	14	92	110	0	0	232
St. James	17	16	234	269	1	0	537
St. John	14	28	348	393	0	0	783
St. Landry	188	254	1362	1526	24	27	3381
St. Martin	62	79	286	369	11	9	816
St. Mary	124	147	522	637	12	20	1462
St. Tammany	177	192	235	285	5	2	896
Tangipahoa	198	233	1013	1110	9	9	2572
Tensas	7	7	109	167	0	0	290
Terrebonne	216	265	474	550	36	60	1601
Union	38	21	105	107	0	1	272
Vermilion	92	139	249	294	5	13	792
Vernon	130	89	105	81	3	1	409
Washington	116	173	350	446	2	3	1090
Webster	53	72	270	315	0	2	712
West Baton Rouge	36	32	143	144	0	0	355
West Carroll	40	46	63	64	0	1	214
West Feliciana	4	12	56	70	3	6	151
Winn	42	48	159	188	1	0	438

Figure 2.2
Number of Children in Foster Care, By Race
Fiscal Year 1996

Parish	White	African American	Total (all races)
Total	1,846	3,921	5,895
Acadia	45	21	66
Allen	20	44	64
Ascension	21	27	49
Assumption	6	30	37
Avoyelles	21	28	51
Beauregard	22	5	27
Bienville	5	21	27
Bossier	23	81	105
Caddo	69	211	287
Calcasieu	53	45	99
Caldwell	6	2	8
Cameron	4	0	4
Catahoula	10	6	17
Claiborne	0	14	14
Concordia	5	27	32
DeSoto	14	35	50
East Baton Rouge	88	316	413
East Carroll	0	30	30
East Feliciana	12	37	51
Evangeline	31	14	45
Franklin	6	25	32
Grant	7	10	17
Iberia	22	37	60
Iberville	1	47	48
Jackson	6	4	11
Jefferson	112	310	434
Jefferson Davis	16	9	26
Lafayette	51	72	126
Lafourche	27	42	72
LaSalle	25	1	26
Lincoln	24	40	65
Livingston	34	16	52
Madison	3	36	39
Morehouse	9	24	33
Natchitoches	26	65	94
Orleans	165	1,089	1,279
Ouachita	37	160	207
Plaquemines	10	11	21
Pointe Coupee	10	10	20
Rapides	72	196	270
Red River	3	12	15
Richland	2	20	22
Sabine	30	4	35
St. Bernard	33	14	49
St. Charles	12	32	44
St. Helena	30	0	30
St. James	2	37	39
St. John	25	41	67
St. Landry	44	103	153
St. Martin	24	46	70
St. Mary	21	27	48
St. Tammany	143	56	202
Tangipahoa	29	45	83
Tensas	1	9	10
Terrebonne	123	78	206
Union	9	13	22
Vermilion	22	15	37
Vernon	61	30	94
Washington	58	70	129
Webster	42	36	83
West Baton Rouge	1	10	11
West Carroll	7	11	18
West Feliciana	1	6	7
Winn	5	8	13

Figure 2.3

Population Income Figures & Total Unemployment Figures, By Parish, 1997

Parish	Median Family Income	% Unemployed	Number Unemployed
Total	*	6.8	135,000
Acadia	$33,300	6.6	1,500
Allen	$27,000	9.6	830
Ascension	$42,600	6.4	2,000
Assumption	$28,800	10.1	910
Avoyelles	$23,000	11.1	1,760
Beauregard	$33,600	8	990
Bienville	$28,500	21.1	1,330
Bossier	$36,000	7.1	3,200
Caddo	$36,000	6.8	8,200
Calcasieu	$38,400	7	6,200
Caldwell	$24,600	13.6	630
Cameron	$36,300	6.4	220
Catahoula	$24,000	14.2	700
Claiborne	$26,500	11.1	650
Concordia	$27,200	16.6	1,430
DeSoto	$26,400	10.2	1,100
East Baton Rouge	$42,600	5	10,400
East Carroll	$15,200	18	540
East Feliciana	$29,400	6.9	520
Evangeline	$23,100	7.4	840
Franklin	$23,100	13	1,280
Grant	$27,100	11.2	750
Iberia	$32,900	6.1	1,880
Iberville	$32,300	9.1	1,110
Jackson	$27,900	8.3	560
Jefferson	$38,300	4.9	11,300
Jefferson Davis	$26,800	8	930
Lafayette	$33,300	4.5	4,100
Lafourche	$32,000	4.6	1,800
LaSalle	$29,900	10.4	620
Lincoln	$35,300	4	740
Livingston	$42,600	7.2	2,800
Madison	$21,000	12.4	680
Morehouse	$26,400	17	2,220
Natchitoches	$25,800	8.8	1,520
Orleans	$38,300	6.9	13,900
Ouachita	$33,700	7.1	4,900
Plaquemines	$38,300	6.7	700
Pointe Coupee	$27,200	9.7	880
Rapides	$33,000	7.2	4,300
Red River	$25,800	12.2	360
Richland	$24,600	14.1	1,150
Sabine	$26,100	7.3	680
St. Bernard	$38,300	6.1	1,900
St. Charles	$38,300	6.6	1,400
St. Helena	$25,400	8.1	330
St. James	$34,000	11.8	1,100
St. John	$38,300	8.6	1,600
St. Landry	$33,300	9	2,900
St. Martin	$33,300	6.9	1,400
St. Mary	$29,800	8.9	2,060
St. Tammany	$38,300	4.6	3,700
Tangipahoa	$29,200	8.5	3,530
Tensas	$19,000	13.6	420
Terrebonne	$32,000	4.7	2,100
Union	$28,100	6.7	730
Vermilion	$28,700	6.4	1,440
Vernon	$28,200	7.8	1,370
Washington	$26,600	8.3	1,340
Webster	$36,000	11.6	2,200
West Baton Rouge	$42,600	6.3	600
West Carroll	$24,800	14.6	700
West Feliciana	$27,400	8	320
Winn	$29,200	8.8	580

Figure 2.4
Employment Status Characteristics for 1990 Census Data, By Parish

Parish		Total Labor Force	Armed Forces	Civilian Employed	Civilian Unemployed
Louisiana					
Total		101,886	2,512	73,067	26,307
Male		54,108	2,156	38,17	13,782
Female		47,778	356	34,897	12,525
Parish					
Acadia					
	total	1,110	*	789	321
	male	606	*	431	175
	female	504	*	358	146
Allen					
	total	345	2	243	100
	male	179	2	130	47
	female	166	*	113	53
Ascension					
	total	1,530	*	1,270	260
	male	865	*	738	127
	female	665	*	532	133
Assumption					
	total	461	2	321	138
	male	291	*	200	91
	female	170	2	121	47
Avoyelles					
	total	784	9	511	264
	male	422	9	291	122
	female	362	*	220	142
Beauregard					
	total	661	20	339	302
	male	378	20	199	159
	female	283	*	140	143
Bienville					
	total	249	*	133	116
	male	115	*	74	41
	female	134	*	59	75
Bossier					
	total	2,413	208	1,671	534
	male	1,303	137	856	310
	female	1,110	71	815	224
Caddo					
	total	5,682	59	3,688	1,935
	male	2,843	42	1,706	1,095
	female	2,839	17	1,982	840
Calcasieu					
	total	4,238	12	3,142	1,084
	male	2,290	12	1,766	512
	female	1,948	*	1,376	572
Caldwell					
	total	211	*	144	67
	male	126	*	88	38
	female	85	*	56	29
Cameron					
	total	189	*	125	64
	male	130	*	91	39
	female	59	*	34	25
Catahoula					
	total	154	*	106	48
	male	108	*	80	28
	female	46	*	26	20
Claiborne					
	total	225	*	189	36
	male	152	*	124	28
	female	73	*	65	8
Concordia					
	total	344	10	246	88
	male	152	*	104	48
	female	192	10	142	40
DeSoto					
	total	496	7	340	149
	male	291	7	218	66
	female	205	*	122	83
E. Baton Rouge					
	total	11,867	74	9,232	2,561
	male	5,939	49	4,545	1,345
	female	5,928	25	4,687	1,216
E. Carroll					
	total	168	*	57	111
	male	90	*	48	42
	female	78	*	9	69
E. Feliciana					
	total	221	9	154	58
	male	121	8	83	30
	female	100	1	71	28
Evangeline					
	total	617	4	442	171
	male	401	*	291	110
	female	216	4	151	61
Franklin					
	total	415	*	308	107
	male	252	*	189	63
	female	163	*	119	44
Grant					
	total	303	*	239	64
	male	209	*	179	30
	female	94	*	60	34
Iberia					
	total	1,583	14	1,083	486
	male	902	14	619	269
	female	681	*	464	217
Iberville					
	total	608	4	389	215
	male	327	4	239	84
	female	281	*	150	131
Jackson					
	total	273	*	195	78
	male	150	*	119	31
	female	123	*	76	47
Jefferson					
	total	11,366	77	9,144	2,145
	male	5,974	69	4,804	1,101
	female	5,392	8	4,34	1,044
Jefferson Davis					
	total	662	*	502	160
	male	378	*	290	88
	female	284	*	212	72
Lafayette					
	total	4,619	33	3,596	990
	male	2,459	33	1,903	523
	female	2,160	*	1,693	467
Lafourche					
	total	2,189	5	1,677	507
	male	1,189	*	958	231
	female	1,000	5	995	276
LaSalle					
	total	294	*	217	77
	male	120	*	120	29
	female	174	*	174	48
Lincoln					
	total	1,743	16	1,253	474
	male	873	16	609	248
	female	870	*	644	226

Parish		Total Labor Force	Armed Forces	Civilian Employed	Civilian Unemployed
Livingston					
	total	2,29	35	1,844	411
	male	1,301	29	1,023	249
	female	989	6	821	162
Madison					
	total	193	*	103	90
	male	100	*	50	50
	female	93	*	53	40
Morehouse					
	total	486	*	313	173
	male	300	*	191	109
	female	186	*	122	64
Natchitoches					
	total	3,364	*	979	418
	male	1,569	*	457	181
	female	1,795	*	522	237
Orleans					
	total	9,990	116	6,558	3,316
	male	4,967	105	3,117	1,745
	female	5,023	11	3,441	1,571
Ouachita					
	total	4,015	17	2,939	1,059
	male	2,013	17	1,426	570
	female	2,002	*	1,513	489
Plaquemines					
	total	526	19	332	175
	male	268	8	160	100
	female	258	11	172	75
Pointe Coupee					
	total	328	*	236	92
	male	200	*	159	41
	female	128	*	77	51
Rapides					
	total	2,967	124	2,146	697
	male	1,578	69	1,088	421
	female	1,389	55	1,058	276
Red River					
	total	156	*	108	48
	male	87	*	72	15
	female	69	*	36	33
Richland					
	total	287	*	180	107
	male	153	*	108	45
	female	134	*	72	62
Sabine					
	total	404	*	254	150
	male	216	*	122	94
	female	188	*	132	56
St. Bernard					
	total	1,775	13	1,243	519
	male	909	13	583	313
	female	866	*	660	206
St. Charles					
	total	675	8	507	160
	male	354	8	273	73
	female	321	*	234	87
St. Helena					
	total	201	*	96	105
	male	85	*	50	35
	female	116	*	46	70
St. James					
	total	464	*	366	98
	male	218	*	185	33
	female	246	*	181	65
St. John					
	total	836	*	638	198
	male	447	*	361	86
	female	389	*	277	112
St. Landry					
	total	1,440	9	880	551
	male	730	9	487	234
	female	710	*	393	317
St. Martin					
	total	1,007	18	756	233
	male	534	18	366	150
	female	473	*	390	83
St. Mary					
	total	1,406	22	1,005	379
	male	835	22	567	246
	female	571	*	438	133
St. Tammany					
	total	3,807	6	3,124	677
	male	1,814	6	1,468	340
	female	1,993	*	1,656	337
Tangipahoa					
	total	2,215	15	1,562	638
	male	1,180	8	838	334
	female	1,035	7	724	304
Tensas					
	total	86	*	39	47
	male	67	*	33	34
	female	19	*	6	13
Terrebonne					
	total	2,370	13	1,788	569
	male	1,267	13	994	260
	female	1,103	*	794	309
Union					
	total	379	*	275	104
	male	203	*	148	55
	female	176	*	127	49
Vermilion					
	total	1,002	8	749	245
	male	592	8	449	135
	female	410	*	300	110
Vernon					
	total	2,541	1,486	635	420
	male	1,911	1,37	365	176
	female	630	116	270	244
Washington					
	total	766	36	469	261
	male	435	29	249	157
	female	331	7	220	104
Webster					
	total	682	*	370	312
	male	331	*	181	150
	female	351	*	189	162
W. Baton Rouge					
	total	606	*	499	107
	male	371	*	230	51
	female	235	*	179	56
W. Carroll					
	total	228	*	172	56
	male	139	*	101	38
	female	89	*	71	18
W. Feliciana					
	total	99	2	58	39
	male	81	2	44	35
	female	18	*	14	4
Winn					
	total	242	*	99	143
	male	149	*	72	77
	female	93	*	27	66

* figures not given

BEST COPY AVAILABLE

Figure 3.1
Two-Year Comparison of General Education Student Count

	1995			1996		
School System	**Public**	**Non-Public**	**Total**	**Public**	**Non-Public**	**Total**
Total	795,905	136,145	932,050	792,315	131,681	923,996
Acadia	10,949	2,042	12,991	10,960	1,101	12,061
Allen	4,611	0	4,611	4,645	0	4,645
Ascension	14,393	1,189	15,582	14,821	1,158	15,979
Assumption	4,994	361	5,355	4,900	402	5,302
Avoyelles	7,671	1,211	8,882	7,728	1,210	8,938
Beauregard	6,545	0	6,545	6,443	0	6,443
Bienville	3,081	0	3,081	3,073	0	3,073
Bossier	23,049	202	23,251	23,542	187	23,729
Caddo	49,477	4,191	53,668	49,577	3,939	53,516
Calcasieu	34,225	3,303	37,528	34,043	3,335	37,378
Caldwell	2,128	0	2,128	2,093	0	2,093
Cameron	2,141	0	2,141	2,181	0	2,181
Catahoula	2,327	0	2,327	2,279	0	2,279
Claiborne	3,124	644	3,768	3,051	781	3,832
Concordia	4,435	294	4,729	4,414	273	4,687
DeSoto	5,433	181	5,614	5,344	190	5,534
East Baton Rouge	59,016	20,283	79,299	57,785	20,360	78,145
East Carroll	2,058	271	2,329	2,032	241	2,273
East Feliciana	3,089	568	3,657	3,012	657	3,669
Evangeline	7,118	813	7,931	7,074	822	7,896
Franklin	4,685	219	4,904	4,575	267	4,842
Grant	3,697	0	3,697	3,760	0	3,760
Iberia	15,761	1,948	17,709	15,543	1,964	17,507
Iberville	5,456	814	6,270	5,394	851	6,245
Jackson	2,946	0	2,946	2,927	0	2,927
Jefferson	55,919	27,273	83,192	55,137	27,073	82,210
Jefferson Davis	6,710	280	6,990	6,453	302	6,755
Lafayette	31,273	5,940	37,213	31,138	4,863	36,001
Lafourche	16,397	2,937	19,334	16,406	2,612	19,018
LaSalle	2,952	0	2,952	2,899	0	2,899
Lincoln	7,188	756	7,944	7,060	800	7,860
Livingston	18,287	104	18,391	18,496	104	18,600

	1995			1996		
School System	**Public**	**Non-Public**	**Total**	**Public**	**Non-Public**	**Total**
Madison	3,330	368	3,698	3,360	350	3,710
Morehouse	6,029	816	6,845	5,795	847	6,642
Natchitoches	7,552	407	7,959	7,475	456	7,931
Orleans	84,516	25,482	109,998	84,416	23,604	108,020
Ouachita	18,097	2,566	20,663	17,814	2,992	20,806
Plaquemines	5,286	410	5,696	5,640	422	6,062
Pointe Coupee	3,656	1,610	5,266	3,629	1,619	5,248
Rapides	24,811	2,010	26,821	24,379	1,986	26,365
Red River	2,085	243	2,328	2,159	241	2,400
Richland	4,314	458	4,772	4,233	563	4,796
Sabine	4,854	0	4,854	4,780	0	4,780
St. Bernard	9,566	3,351	12,917	9,295	3,547	12,842
St. Charles	9,965	750	10,715	10,239	824	11,063
St. Helena	1,693	0	1,693	1,639	0	1,639
St. James	4,502	444	4,946	4,503	445	4,948
St. John	7,258	2,959	10,217	7,220	2,951	10,171
St. Landry	17,196	2,793	19,989	17,002	2,771	19,773
St. Martin	9,279	1,188	10,467	9,118	1,213	10,331
St. Mary	11,869	1,347	13,216	11,792	1,351	13,143
St. Tammany	32,086	5,172	37,258	32,677	5,393	38,070
Tangipahoa	18,229	2,449	20,678	18,609	1,709	20,318
Tensas	1,566	221	1,787	1,461	0	1,461
Terrebonne	21,016	2,782	23,798	20,880	2,822	23,702
Union	4,052	0	4,052	3,965	0	3,965
Vermilion	9,780	947	10,727	9,812	949	10,761
Vernon	11,369	0	11,369	10,877	0	10,877
Washington	5,089	418	5,507	5,018	0	5,018
Webster	8,418	354	8,772	8,392	373	8,765
West Baton Rouge	4,056	508	4,564	4,024	491	4,515
West Carroll	2,758	0	2,758	2,805	0	2,805
West Feliciana	2,345	0	2,345	2,358	0	2,358
Winn	3,322	0	3,322	3,349	0	3,349
Monroe City	11,254	0	11,254	11,250	270	11,520
Bogalusa City	3,572	268	3,840	3,565	0	3,565

Public Count Based on October 1 SIS Total Student Membership

Non-Public Count taken from Nonpublic Annual School Report, Office of Academic Programs

Figure 3.2
Number of Public Education Students, By Ethnic Group
1996-1997

School System	American Indian	Asian	Black	Hispanic	White	TOTAL
Total	4,470	10,181	365,773	9,357	402,534	792,315
Acadia	6	15	3,108	31	7,800	10,960
Allen	19	10	1,133	36	3,447	4,645
Ascension	17	54	4,537	168	10,045	14,821
Assumption	5	32	2,173	15	2,675	4,900
Avoyelles	20	11	3,122	35	4,540	7,728
Beauregard	13	20	1,088	49	5,273	6,443
Bienville	1	0	1,922	1	1,149	3,073
Bossier	49	275	6,340	410	16,468	23,542
Caddo	39	254	30,172	254	18,858	49,577
Calcasieu	45	179	10,643	141	23,035	34,043
Caldwell	1	7	416	32	1,637	2,093
Cameron	3	3	111	23	2,041	2,181
Catahoula	1	0	853	18	1,407	2,279
Claiborne	4	8	1,980	3	1,056	3,051
Concordia	0	0	2,236	3	2,175	4,414
DeSoto	3	5	2,953	41	2,342	5,344
East Baton Rouge	28	1,275	36,375	262	19,845	57,785
East Carroll	0	0	1,833	3	196	2,032
East Feliciana	1	2	2,309	2	698	3,012
Evangeline	7	5	2,764	10	4,288	7,074
Franklin	1	3	2,078	10	2,483	4,575
Grant	14	1	657	7	3,081	3,760
Iberia	22	495	6,194	75	8,757	15,543
Iberville	0	9	3,894	9	1,482	5,394
Jackson	0	0	1,052	2	1,873	2,927
Jefferson	275	2,290	23,600	3,616	25,356	55,137
Jefferson Davis	82	8	1,561	23	4,779	6,453
Lafayette	44	326	10,681	233	19,854	31,138
Lafourche	562	193	3,505	107	12,039	16,406
LaSalle	32	10	358	6	2,493	2,899
Lincoln	4	57	3,426	28	3,545	7,060

School System	American Indian	Asian	Black	Hispanic	White	TOTAL
Livingston	11	35	1,148	62	17,240	18,496
Madison	1	4	2,808	33	514	3,360
Morehouse	0	6	3,804	23	1,962	5,795
Natchitoches	19	27	4,080	53	3,296	7,475
Orleans	26	2,096	76,511	1,105	4,678	84,416
Ouachita	5	101	4,233	76	13,399	17,814
Plaquemines	65	238	1,891	35	3,411	5,640
Pointe Coupee	4	1	2,457	7	1,160	3,629
Rapides	313	255	9,985	96	13,730	24,379
Red River	6	1	1,251	2	899	2,159
Richland	0	2	2,416	27	1,788	4,233
Sabine	708	3	1,322	292	2,455	4,780
St. Bernard	93	175	1,062	301	7,664	9,295
St. Charles	16	51	3,474	156	6,542	10,239
St. Helena	0	6	1,500	1	132	1,639
St. James	0	0	3,132	12	1,359	4,503
St. John	15	16	4,986	126	2,077	7,220
St. Landry	12	26	9,276	32	7,656	17,002
St. Martin	5	101	4,151	10	4,851	9,118
St. Mary	117	335	5,403	109	5,828	11,792
St. Tammany	44	218	4,821	262	27,332	32,677
Tangipahoa	7	82	8,278	119	10,123	18,609
Tensas	0	1	1,126	28	306	1,461
Terrebonne	1,630	249	5,358	125	13,518	20,880
Union	2	4	1,636	49	2,274	3,965
Vermilion	6	297	2,058	24	7,427	9,812
Vernon	51	230	2,476	421	7,699	10,877
Washington	1	0	2,028	18	2,971	5,018
Webster	6	11	3,575	25	4,775	8,392
West Baton Rouge	1	8	1,913	20	2,082	4,024
West Carroll	2	0	619	14	2,170	2,805
West Feliciana	0	4	1,090	3	1,261	2,358
Winn	2	5	1,222	15	2,105	3,349
Monroe City	1	33	9,941	20	1,255	11,250
Bogalusa City	3	13	1,668	3	1,878	3,565

Figure 3.3

Number of Registered Students in Non-Public Schools, By Race and Gender
1995-1996 School Year

	Females				Total	Males				Total	Black	Hispanic	White	Other	Sum
Parish	Black	Hispanic	White	Other	Female	Black	Hispanic	White	Other	Male	Total	Total	Total	Total	Total
Total	9,219	1,054	55,272	940	66,485	8,783	918	56,194	1,007	66,902	18,002	1,972	111,466	1,947	133,387
Acadia	28	0	982	2	1,012	25	2	998	0	1,025	53	2	1,980	2	2,037
Allen	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Ascension	41	0	586	0	627	29	0	578	0	607	70	0	1,164	0	1,234
Assumption	33	0	152	0	185	32	0	141	0	173	65	0	293	0	358
Avoyelles	84	0	592	1	677	64	0	489	0	553	148	0	1,081	1	1,230
Beauregard	0	0	1	0	1	0	0	1	0	1	0	0	2	0	2
Bienville	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Bossier	20	4	179	8	211	16	3	170	7	196	36	7	349	15	407
Caddo	292	21	1,833	18	2,164	341	14	1,897	24	2,276	633	35	3,730	42	4,440
Calcasieu	317	14	1,263	10	1,604	323	10	1,277	15	1,625	640	24	2,540	25	3,229
Caldwell	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Cameron	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Catahoula	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Claiborne	0	0	324	0	324	0	0	327	0	327	0	0	651	0	651
Concordia	0	0	149	0	149	0	0	142	0	142	0	0	291	0	291
DeSoto	0	2	88	2	92	0	2	87	2	91	0	4	175	4	183
East Baton Rouge	948	a65	8,507	68	9,588	1,040	89	8,940	107	10,176	1,988	154	17,447	175	19,764
East Carroll	2	0	127	8	137	29	2	130	6	167	31	2	257	14	304
East Feliciana	0	0	301	0	301	0	0	300	0	300	0	0	601	0	601
Evangeline	0	0	417	0	417	0	0	397	0	397	0	0	814	0	814
Franklin	0	0	106	2	108	0	0	109	2	111	0	0	215	4	219
Grant	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Iberia	104	3	885	3	995	83	1	863	4	951	187	4	1,748	7	1,946
Iberville	4	0	363	1	368	18	1	419	6	444	22	1	782	7	812
Jackson	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Jefferson	681	458	11,890	345	13,374	719	424	11,700	320	13,163	1,400	882	23,590	665	26,537
Jefferson Davis	15	1	110	0	126	8	0	143	1	152	23	1	253	1	278
Lafayette	321	13	2,276	16	2,626	369	10	2,307	17	2,703	690	23	4,583	33	5,329
Lafourche	38	0	1,251	6	1,295	32	2	1,224	11	1,269	70	2	2,475	17	2,564
LaSalle	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

Parish	Females Black	Hispanic	White	Other	Total Female	Males Black	Hispanic	White	Other	Total Male	Black Total	Hispanic Total	White Total	Other Total	Sum Total
Lincoln	5	2	348	7	362	5	2	374	13	394	10	4	722	20	756
Livingston	1	1	46	0	48	0	0	54	0	54	1	1	100	0	102
Madison	0	0	198	0	198	0	0	167	1	168	0	0	365	1	366
Morehouse	4	0	401	0	405	4	1	408	0	413	8	1	809	0	818
Natchitoches	11	2	188	2	203	15	1	191	1	208	26	3	379	3	411
Orleans	5,491	329	6,460	255	12,535	4,880	237	7,224	273	12,614	10,371	566	13,684	528	25,149
Ouachita	84	2	1,225	9	1,320	98	2	1,162	10	1,272	182	4	2,387	19	2,592
Plaquemines	41	1	169	13	224	24	0	152	10	186	65	1	321	23	410
Pointe Coupee	24	0	748	7	779	37	2	756	5	800	61	2	1,504	12	1,579
Rapides	47	5	972	17	1,041	43	7	998	12	1,060	90	12	1,970	29	2,101
Red River	0	0	107	0	107	0	0	133	0	133	0	0	240	0	240
Richland	1	1	215	3	220	0	1	232	5	238	1	2	447	8	458
Sabine	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
St. Bernard	23	15	1,626	21	1,685	33	20	1,586	30	1,669	56	35	3,212	51	3,354
St. Charles	37	9	323	4	373	33	2	334	4	373	70	11	657	8	746
St. Helena	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
St. James	9	0	179	0	188	9	0	177	0	186	18	0	356	0	374
St. John the Baptist	83	13	1,324	7	1,427	73	11	1,288	5	1,377	156	24	2,612	12	2,804
St. Landry	128	21	1,362	12	1,523	76	4	1,115	9	1,204	204	25	2,477	21	2,727
St. Martin	83	5	465	8	561	79	10	478	10	577	162	15	943	18	1,138
St. Mary	33	5	627	37	702	39	6	602	40	687	72	11	1,229	77	1,389
St. Tammany	55	49	2,352	22	2,478	77	37	2,508	24	2,646	132	86	4,860	46	5,124
Tangipahoa	31	0	1,185	6	1,222	33	2	1,196	13	1,244	64	2	2,381	19	2,466
Tensas	0	0	101	1	102	0	1	118	2	121	0	1	219	3	223
Terrebonne	70	12	1,255	12	1,349	69	9	1,330	13	1,421	139	21	2,585	25	2,770
Union	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Vermilion	19	1	457	2	479	17	3	447	2	469	36	4	904	4	948
Vernon	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Washington	0	0	142	5	147	2	0	117	3	122	2	0	259	8	269
Webster	0	0	160	0	160	1	0	174	0	175	1	0	334	0	335
West Baton Rouge	11	0	255	0	266	8	0	234	0	242	19	0	489	0	508
West Carroll	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
West Feliciana	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Winn	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
City of Monroe	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
City of Bogalusa	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

Figure 3.4
Number of Registered Gifted and Talented Students, By Gender
1996-1997 School Year

Parish	Male	Female	TOTAL
Total	12,715	12,429	25,144
Acadia	45	51	96
Allen	63	46	109
Ascension	209	181	390
Assumption	20	20	40
Avoyelles	24	26	50
Beauregard	76	71	147
Bienville	19	16	35
Bossier	261	251	512
Caddo	582	638	1,220
Calcasieu	620	532	1,152
Caldwell	21	19	40
Cameron	81	77	158
Catahoula	12	13	25
Claiborne	75	61	136
Concordia	22	41	63
DeSoto	56	65	121
East Baton Rouge	1,488	1,454	2,942
East Carroll	2	1	3
East Feliciana	10	13	23
Evangeline	23	11	34
Franklin	61	64	125
Grant	15	21	36
Iberia	276	297	573
Iberville	26	21	47
Jackson	29	64	93
Jefferson	1,181	1,144	2,325
Jefferson Davis	42	38	80
Lafayette	559	574	1,133
Lafourche	73	58	131
LaSalle	16	21	37
Lincoln	108	85	193
Livingston	124	87	211
Madison	11	13	24
Morehouse	37	37	74
Natchitoches	153	193	346

District	Male	Female	TOTAL
Orleans	1,969	2,073	4,042
Ouachita	553	546	1,099
Plaquemines	66	60	126
Pointe Coupee	10	10	20
Rapides	261	265	526
Red River	8	5	13
Richland	75	81	156
Sabine	40	32	72
St. Bernard	173	159	332
St. Charles	298	280	578
St. Helena	1	1	2
St. James	23	18	41
St. John	62	40	102
St. Landry	97	105	202
St. Martin	31	30	61
St. Mary	116	100	216
St. Tammany	1,259	1,149	2,408
Tangipahoa	66	67	133
Tensas	37	10	47
Terrebonne	272	262	534
Union	22	23	45
Vermilion	39	25	64
Vernon	87	92	179
Washington	135	99	234
Webster	45	47	92
West Baton Rouge	103	80	183
West Carroll	28	33	61
West Feliciana	29	20	49
Winn	28	31	59
Monroe City	301	320	621
Bogalusa City	60	61	121
Special Schl. Dist. #1	1	1	2
La. School for Deaf	0	0	0
La. School for V. I.	0	0	0
Special Ed. Center	0	0	0

Figure 3.5
Number of Registered Gifted and Talented Students, By Ethnic Group
1996-1997 School Year

Parish	American Indian	Asian	Black	Hispanic	White	TOTAL
Total	78	671	4,614	276	19,505	25,144
Acadia	0	1	3	0	92	96
Allen	0	0	9	0	100	109
Ascension	0	2	38	0	350	390
Assumption	0	0	2	0	38	40
Avoyelles	0	0	2	0	48	50
Beauregard	0	1	8	1	137	147
Bienville	0	0	6	0	29	35
Bossier	1	6	22	5	478	512
Caddo	2	36	98	4	1,080	1,220
Calcasieu	2	24	76	6	1,044	1,152
Caldwell	0	0	3	0	37	40
Cameron	0	1	0	2	155	158
Catahoula	0	0	2	0	23	25
Claiborne	0	1	29	2	104	136
Concordia	0	0	7	0	56	63
DeSoto	0	0	9	1	111	121
East Baton Rouge	7	0	452	11	2,472	2,942
East Carroll	0	0	3	0	0	3
East Feliciana	0	0	13	0	10	23
Evangeline	0	1	2	0	31	34
Franklin	0	0	18	1	106	125
Grant	0	0	2	0	34	36
Iberia	1	8	71	1	492	573
Iberville	0	0	20	0	27	47
Jackson	0	0	21	0	72	93
Jefferson	8	230	321	98	1,668	2,325
Jefferson Davis	0	2	0	0	78	80
Lafayette	3	23	95	6	1,006	1,133
Lafourche	1	5	2	0	123	131
LaSalle	0	0	2	0	35	37
Lincoln	0	8	16	1	168	193
Livingston	1	0	0	1	209	211
Madison	0	0	11	1	12	24
Morehouse	0	0	18	0	56	74
Natchitoches	2	7	70	5	262	346
Orleans	6	202	2,216	76	1,542	4,042
Ouachita	0	14	69	1	1,015	1,099

District	American Indian	Asian	Black	Hispanic	White	TOTAL
Plaquemines	0	1	16	0	109	126
Pointe Coupee	0	1	4	0	15	20
Rapides	0	16	40	1	469	526
Red River	0	0	0	0	13	13
Richland	0	0	25	0	131	156
Sabine	9	0	2	3	58	72
St. Bernard	3	8	19	10	292	332
St. Charles	0	5	79	8	486	578
St. Helena	0	0	1	0	1	2
St. James	0	0	11	0	30	41
St. John	0	1	42	2	57	102
St. Landry	0	0	42	0	160	202
St. Martin	0	1	5	0	55	61
St. Mary	2	6	19	1	188	216
St. Tammany	16	28	72	15	2,277	2,408
Tangipahoa	0	9	13	1	110	133
Tensas	0	0	29	0	18	47
Terrebonne	12	9	15	2	496	534
Union	0	0	5	0	40	45
Vermilion	0	0	2	0	62	64
Vernon	1	9	11	8	150	179
Washington	0	1	36	1	196	234
Webster	0	0	7	0	85	92
West Baton Rouge	1	1	29	0	152	183
West Carroll	0	0	2	0	59	61
West Feliciana	0	0	6	0	43	49
Winn	0	0	8	1	50	59
Monroe	0	3	312	0	306	621
Bogalusa City	0	0	24	0	97	121
Sp. Schl. Dist. #1	0	0	2	0	0	2
La. Sch for Deaf	0	0	0	0	0	0
La. School for V. I.	0	0	0	0	0	0
Special Ed. Center	0	0	0	0	0	0

Based on Oct. 1, 1996 Special Education Minimum Foundation Program membership count.

Figure 3.6
Individuals with Disabilities Education Act. By Age Group

Parish	IDEA 3-5	IDEA 6-21	1993 IDEA Total	Chap. 1	Grand Total	IDEA 3-5	IDEA 6-21	1994 IDEA Total	Chap. 1	Grand Total
Total	9,005	75,848	84,853	2,078	86,931	9,658	79,047	88,705	2,251	90,956
Acadia	106	1,387	1,493	0	1,493	83	1,368	1,451	0	1,451
Allen	98	332	430	0	430	86	349	435	0	435
Ascension	201	1,587	1,788	0	1,788	218	1,707	1,925	0	1,925
Assumption	125	396	521	37	558	141	412	553	34	587
Avoyelles	81	622	703	0	703	66	621	687	0	687
Beauregard	163	542	705	0	705	180	572	752	0	752
Bienville	53	259	312	0	312	49	285	334	0	334
Bossier	175	1,154	1,329	0	1,329	215	1,347	1,562	0	1,562
Caddo	540	4,605	5,145	0	5,145	660	4,772	5,432	0	5,432
Calcasieu	473	3,379	3,852	0	3,852	530	3,500	4,030	0	4,030
Caldwell	31	140	171	0	171	31	153	184	0	184
Cameron	29	226	255	0	255	25	246	271	0	271
Catahoula	14	189	203	0	203	17	179	196	0	196
Claiborne	56	241	297	0	297	83	274	357	0	357
Concordia	37	258	295	0	295	37	285	322	0	322
DeSoto	54	447	501	0	501	58	485	543	0	543
East Baton Rouge	537	5,971	6,508	0	6,508	550	5,930	6,480	0	6,480
East Carroll	18	124	142	0	142	18	131	149	0	149
East Feliciana	32	223	255	0	255	48	238	286	0	286
Evangeline	45	883	928	15	943	48	915	963	18	981
Franklin	68	243	311	0	311	61	258	319	0	319
Grant	54	291	345	0	345	58	306	364	0	364
Iberia	265	2,413	2,678	54	2,732	267	2,324	2,591	57	2,648
Iberville	39	523	562	0	562	51	519	570	0	570
Jackson	14	199	213	0	213	20	229	249	0	249
Jefferson	494	6,382	6,876	8	6,884	594	6,560	7,154	8	7,162
Jefferson Davis	113	788	901	32	933	62	765	827	15	842
Lafayette	322	2,933	3,255	0	3,255	302	2,951	3,253	0	3,253
Lafourche	313	2,167	2,480	65	2,545	334	2,158	2,492	78	2,570
LaSalle	30	194	224	10	234	31	182	213	7	220
Lincoln	51	441	492	0	492	62	467	529	0	529
Livingston	139	1,303	1,442	0	1,442	121	1,404	1,525	0	1,525
Madison	36	216	252	0	252	34	247	281	0	281
Morehouse	115	604	719	0	719	96	628	724	0	724

	1993					1994				
Parish	**IDEA 3-5**	**IDEA 6-21**	**IDEA Total**	**Chap. 1**	**Grand Total**	**IDEA 3-5**	**IDEA 6-21**	**IDEA Total**	**Chap. 1**	**Grand Total**
Natchitoches	131	606	737	32	769	109	674	783	53	836
Orleans	584	6,055	6,639	0	6,639	666	6,610	7,276	0	7,276
Ouachita	102	1,286	1,388	12	1,400	125	1,382	1,507	48	1,555
Plaquemines	30	415	445	0	445	38	436	474	0	474
Pointe Coupee	65	439	504	0	504	62	482	544	0	544
Rapides	258	2,490	2,748	0	2,748	255	2,558	2,813	0	2,813
Red River	19	153	172	0	172	26	162	188	0	188
Richland	81	364	445	0	445	102	390	492	0	492
Sabine	58	427	485	18	503	73	413	486	9	495
St. Bernard	148	1,212	1,360	0	1,360	140	1,121	1,261	0	1,261
St. Charles	78	837	915	33	948	94	907	1,001	33	1,034
St. Helena	31	238	269	0	269	32	226	258	0	258
St. James	45	287	332	29	361	48	293	341	29	370
St. John	214	716	930	30	960	223	895	1,118	20	1,138
St. Landry	189	1,774	1,963	82	2,045	214	1,937	2,151	75	2,226
St. Martin	151	1,124	1,275	35	1,310	134	1,145	1,279	32	1,311
St. Mary	126	1,302	1,428	42	1,470	136	1,356	1,492	31	1,523
St. Tammany	388	3,141	3,529	0	3,529	474	3,432	3,906	30	3,936
Tangipahoa	246	1,863	2,109	0	2,109	270	1,997	2,267	0	2,267
Tensas	58	215	273	0	273	52	222	274	0	274
Terrebonne	252	2,433	2,685	36	2,721	277	2,582	2,859	46	2,905
Union	72	218	290	0	290	70	260	330	0	330
Vermilion	160	1,225	1,385	52	1,437	163	1,272	1,435	38	1,473
Vernon	121	937	1,058	24	1,082	138	1,048	1,186	46	1,232
Washington	79	523	602	0	602	91	558	649	0	649
Webster	80	675	755	0	755	97	713	810	0	810
West Baton Rouge	31	288	319	0	319	31	282	313	0	313
West Carroll	52	189	241	0	241	43	195	238	0	238
West Feliciana	22	233	255	5	260	19	245	264	5	269
Winn	68	321	389	0	389	73	304	377	0	377
Monroe City	69	864	933	40	973	69	854	923	36	959
Bogalusa City	64	299	363	0	363	61	347	408	0	408
Sp Schl. Dist. #1	2	638	640	0	640	1	601	602	0	602
OMR	0	0	0	1,364	1,364	0	0	0	1,489	1,489
School for Deaf	9	280	289	0	289	13	270	283	0	283
School for V. I.	0	60	60	0	60	2	53	55	0	55
Special Ed Center	1	59	60	0	60	1	58	59	0	59
LSU Medical Ctr.	0	0		23	23	0	0	0	14	14

Figure 3.7
Number of Students with Disabilities, By Ethnic Group
Minimum Foundation Membership as of October 1, 1996

School System	American Indian	Asian	Black	Hispanic	White	TOTAL
Total	556	267	47,697	715	42,636	91,871
Acadia	1	1	547	2	960	1,511
Allen	1	0	122	1	284	408
Ascension	4	2	872	8	1,136	2,022
Assumption	1	2	367	4	248	622
Avoyelles	0	0	384	1	295	680
Beauregard	0	1	166	2	537	706
Bienville	0	0	252	0	95	347
Bossier	4	6	759	25	933	1,727
Caddo	4	12	4,107	19	1,611	5,753
Calcasieu	6	12	1,462	18	2,537	4,035
Caldwell	0	0	60	1	134	195
Cameron	1	0	29	2	248	280
Catahoula	1	0	102	0	90	193
Claiborne	0	0	280	0	104	384
Concordia	0	0	226	1	146	373
DeSoto	0	0	369	2	189	560
East Baton Rouge	3	0	4,525	7	1,608	6,143
East Carroll	0	0	123	0	20	143
East Feliciana	0	0	236	0	75	311
Evangeline	4	0	459	0	556	1,019
Franklin	0	0	198	1	127	326
Grant	1	0	130	2	318	451
Iberia	6	9	1,215	8	1,251	2,489
Iberville	0	0	487	0	124	611
Jackson	0	0	128	0	163	291
Jefferson	29	60	3,346	265	3,876	7,576
Jefferson Davis	6	0	261	6	609	882
Lafayette	3	16	1,482	12	1,669	3,182
Lafourche	107	20	712	16	1,585	2,440
LaSalle	0	0	30	0	196	226
Lincoln	0	1	336	0	229	566
Livingston	9	0	235	5	1,479	1,728
Madison	0	0	254	1	56	311
Morehouse	0	0	537	1	205	743

School System	American Indian	Asian	Black	Hispanic	White	TOTAL
Natchitoches	1	1	520	4	261	787
Orleans	0	28	6,654	98	433	7,213
Ouachita	6	2	505	8	1,085	1,606
Plaquemines	5	2	157	2	291	457
Pointe Coupee	0	0	333	3	240	576
Rapides	8	7	1,347	5	1,475	2,842
Red River	0	0	188	1	70	259
Richland	1	1	302	3	155	462
Sabine	39	0	227	27	270	563
St. Bernard	9	17	180	32	1,145	1,383
St. Charles	0	1	464	8	523	996
St. Helena	0	0	271	0	18	289
St. James	0	0	313	1	123	437
St. John	1	2	850	15	382	1,250
St. Landry	4	2	1,367	8	934	2,315
St. Martin	2	5	705	0	531	1,243
St. Mary	6	14	873	6	677	1,576
St. Tammany	15	12	983	30	3,206	4,246
Tangipahoa	1	5	1,417	2	1,076	2,501
Tensas	0	0	210	0	37	247
Terrebonne	254	4	1,036	9	1,781	3,084
Union	0	0	181	3	132	316
Vermilion	1	8	395	0	1,091	1,495
Vernon	7	6	301	29	816	1,159
Washington	0	0	342	1	348	691
Webster	1	1	469	4	428	903
West Baton Rouge	0	0	215	1	179	395
West Carroll	0	0	81	1	181	263
West Feliciana	0	0	159	0	122	281
Winn	0	0	181	0	173	354
Monroe City	0	0	920	0	121	1,041
Bogalusa City	0	0	220	0	269	489
Special Schl. Dist. #1	0	1	351	1	183	536
La. School for Deaf	4	5	131	2	129	271
La. School for V. I	0	0	33	0	19	52
Special Ed. Center	0	1	18	1	39	59

Based on Oct. 1, 1996 Special Education Minimum Foundation Program membership count.

Figure 3.8
Per Pupil Expenditure By Parish in Louisiana Public Schools, 1997

Parish	Level 1 & 2 per pupil expenditure
Total	$4,327
Acadia	3,618
Allen	4,358
Ascension	4,978
Assumption	4,582
Avoyelles	3,711
Beauregard	4,664
Bienville	5,297
Bossier	4,087
Caddo	4,404
Calcasieu	4,712
Caldwell	4,132
Cameron	5,319
Catahoula	4,401
Claiborne	4,009
Concordia	4,006
DeSoto	5,024
East Baton Rouge	3,923
East Carroll	3,719
East Feliciana	4,537
Evangeline	3,858
Franklin	3,699
Grant	4,049
Iberia	4,547
Iberville	4,730
Jackson	4,677
Jefferson	4,460
Jefferson Davis	4,325
Lafayette	4,196
Lafourche	4,549
LaSalle	4,466
Lincoln	4,126
Livingston	4,169
Madison	3,640
Morehouse	4,068
Natchitoches	4,405
Orleans	4,201
Ouachita	4,344
Plaquemines	3,879
Pointe Coupee	4,407
Rapides	4,709
Red River	4,267
Richland	4,300
Sabine	4,026
St. Bernard	4,175
St. Charles	4,971
St. Helena	4,300
St. James	4,773
St. John	5,038
St. Landry	3,759
St. Martin	4,165
St. Mary	4,415
St. Tammany	5,230
Tangipahoa	4,057
Tensas	4,428
Terrebonne	4,165
Union	3,652
Vermilion	3,913
Vernon	4,164
Washington	4,495
Webster	4,094
West Baton Rouge	4,113
West Carroll	3,769
West Feliciana	4,816
Winn	4,523
Monroe City	4,140
Bogalusa City	4,008

Figure 4.1
Mental Health Services Delivered by Community Mental Health Centers, By Parish for Ages 5 to 17 for Fiscal Year 1997

Parish	Cases
Total	8249
Acadia	282
Allen	27
Ascension	171
Assumption	0
Avoyelles	324
Beauregard	43
Bienville	0
Bossier	0
Caddo	221
Calcasieu	295
Caldwell	0
Cameron	0
Catahoula	0
Claiborne	0
Concordia	0
DeSoto	31
E. Baton Rouge	450
E. Carroll	0
E. Feliciana	0
Evangeline	166
Franklin	48
Grant	0
Iberia	145
Iberville	0
Jackson	51
Jefferson	1548
Jefferson Davis	0
Lafayette	543
Lafourche	131
LaSalle	0
Lincoln	93
Livingston	0
Madison	129
Morehouse	0
Natchitoches	154
Orleans	593
Ouachita	361
Plaquemines	0
Pointe Coupee	0
Rapides	439
Red River	36
Richland	94
Sabine	20
St. Bernard	108
St. Charles	0
St. Helena	0
St. James	0
St. John	210
St. Landry	0
St. Martin	0
St. Mary	164
St. Tammany	595
Tangipahoa	300
Tensas	0
Terrebonne	212
Union	0
Vermilion	0
Vernon	86
Washington	65
Webster	114
W. Baton Rouge	0
W. Carroll	0
W. Feliciana	0
Winn	0

Figure 4.2
Number of Sexual Abuse Cases Found Valid, By Race
Fiscal Year 1996

Parish	White	African American	Total (all races)
Total	555	371	926
Acadia	6	3	9
Allen	7	1	8
Ascension	6	3	9
Assumption	*	*	*
Avoyelles	14	6	20
Beauregard	21		21
Bienville	*	*	*
Bossier	12	9	21
Caddo	18	22	40
Calcasieu	23	22	46
Caldwell	*	*	*
Cameron	*	*	*
Catahoula	2	0	2
Claiborne	*	*	*
Concordia	3	2	5
DeSoto	2	6	8
East Baton Rouge	19	29	49
East Carroll	0	1	1
East Feliciana	8	2	10
Evangeline	7	5	12
Franklin	3	3	6
Grant	11	0	11
Iberia	14	4	18
Iberville	5	0	5
Jackson	*	*	*
Jefferson	51	38	91
Jefferson Davis	7	0	7
Lafayette	*	*	*
Lafourche	17	4	21
LaSalle	*	*	*
Lincoln	1	0	2
Livingston	24	2	26
Madison	2	1	3
Morehouse	3	2	5
Natchitoches	7	2	9
Orleans	3	77	81
Ouachita	44	16	63
Plaquemines	3	6	9
Pointe Coupee	0	2	2
Rapides	28	24	53
Red River	*	*	*
Richland	7	3	10
Sabine	8	1	9
St. Bernard	10	0	10
St. Charles	*	*	*
St. Helena	*	*	*
St. James	*	*	*
St. John	8	8	16
St. Landry	7	6	13
St. Martin	7	6	13
St. Mary	5	3	8
St. Tammany	34	10	46
Tangipahoa	10	5	16
Tensas	*	*	*
Terrebonne	23	7	32
Union	1	2	3
Vermilion	10	0	10
Vernon	18	1	20
Washington	17	2	19
Webster	10	6	18
West Baton Rouge	*	*	*
West Carroll	0	0	0
West Feliciana	*	*	*
Winn	9	1	10

Figure 4.3
Number of Physical Abuse Cases Found Valid, By Race
Fiscal Year 1996

Parish	White	African American	Total (all races)
Total	1428	1537	2965
Acadia	53	25	79
Allen	18	6	24
Ascension	18	6	24
Assumption	*	*	*
Avoyelles	28	10	38
Beauregard	20	7	28
Bienville	*	*	*
Bossier	49	34	85
Caddo	70	135	206
Calcasieu	110	52	163
Caldwell	*	*	*
Cameron	*	*	*
Catahoula	2	2	4
Claiborne	*	*	*
Concordia	5	4	9
DeSoto	7	12	19
East Baton Rouge	40	76	118
East Carroll	10	6	16
East Feliciana	16	11	27
Evangeline	17	10	28
Franklin	3	5	9
Grant	17	4	21
Iberia	28	21	50
Iberville	6	8	14
Jackson	*	*	*
Jefferson	191	188	400
Jefferson Davis	34	17	51
Lafayette	*	*	*
Lafourche	25	27	53
LaSalle	*	*	*
Lincoln	10	14	24
Livingston	72	3	76
Madison	3	4	8
Morehouse	7	10	17
Natchitoches	18	29	50
Orleans	25	382	415
Ouachita	61	71	132
Plaquemines	19	8	27
Pointe Coupee	9	9	18
Rapides	73	53	128
Red River	*	*	*
Richland	6	1	7
Sabine	17	11	28
St. Bernard	31	9	44
St. Charles	*	*	*
St. Helena	*	*	*
St. James	*	*	*
St. John	25	30	55
St. Landry	11	18	29
St. Martin	25	27	52
St. Mary	21	18	40
St. Tammany	54	11	67
Tangipahoa	21	12	34
Tensas	*	*	*
Terrebonne	30	21	53
Union	6	4	10
Vermilion	23	6	36
Vernon	50	22	78
Washington	9	3	12
Webster	26	23	49
West Baton Rouge	*	*	*
West Carroll	0	0	0
West Feliciana	*	*	*
Winn	9	1	10

Figure 4.4
Number of Neglect Cases Found Valid, By Race
Fiscal Year 1996

Parish	White	African American	Total (all races)
Total	3789	6069	9858
Acadia	110	92	204
Allen	38	21	62
Ascension	36	62	102
Assumption	*	*	*
Avoyelles	42	20	62
Beauregard	87	36	129
Bienville	*	*	*
Bossier	98	104	212
Caddo	127	586	717
Calcasieu	192	160	364
Caldwell	*	*	*
Cameron	*	*	*
Catahoula	78	27	107
Claiborne	*	*	*
Concordia	16	32	50
DeSoto	17	29	47
East Baton Rouge	76	400	485
East Carroll	35	79	116
East Feliciana	28	61	89
Evangeline	41	46	91
Franklin	36	30	66
Grant	63	26	89
Iberia	55	89	150
Iberville	24	58	82
Jackson	*	*	*
Jefferson	348	408	788
Jefferson Davis	60	59	124
Lafayette	179	204	*
Lafourche	96	109	207
LaSalle	*	*	*
Lincoln	21	57	78
Livingston	129	20	149

Parish	White	African American	Total (all races)
Madison	15	37	53
Morehouse	21	45	66
Natchitoches	46	145	195
Orleans	81	1385	1494
Ouachita	183	382	570
Plaquemines	81	52	136
Pointe Coupee	24	85	109
Rapides	185	298	492
Red River	*	*	*
Richland	6	16	22
Sabine	47	45	92
St. Bernard	82	33	116
St. Charles	*	*	*
St. Helena	*	*	*
St. James	*	*	*
St. John	39	102	141
St. Landry	87	113	204
St. Martin	39	64	105
St. Mary	63	50	113
St. Tammany	280	79	373
Tangipahoa	34	60	95
Tensas	*	*	*
Terrebonne	100	89	193
Union	17	34	51
Vermilion	36	27	70
Vernon	176	82	272
Washington	43	49	92
Webster	37	118	158
West Baton Rouge	*	*	*
West Carroll	1	3	4
West Feliciana	*	*	*
Winn	34	36	72

Figure 4.5
Department of Public Safety and Corrections / Office of Youth Development
Population by Adjudicated Offense As of 12/31/97

Offense	**Total**	**Custody Secure**	**Custody Non-Secure**	**Non-Custody**
Homicide	97	60	10	27
Assault/ Battery	1460	345	141	974
Robbery	450	277	36	137
Sex	295	112	31	152
Burglary	1730	427	223	1073
Theft	1586	264	197	1125
Drugs	1080	324	98	658
Other Person Violent	76	29	8	39
Other Person Non-Violent	222	51	17	154
Public Order	345	19	27	299
Other Property	382	49	30	304
Weapons	240	45	25	170
Status	781	0	3339	442
Unknown	410	0	0	410
Total	9156	2010	1182	5964

* Of the 410 unknown, 288 are IAA's or FINS

Figure 4.6
Department of Public Safety and Corrections / Office of Youth Development Population, By Adjudicated Offense As of 12/31/97

Parish	Total	Custody Secure	Custody Non-Secure	Non-Custody
Total	9156	2010	1182	5964
Acadia	143	45	14	84
Allen	65	9	5	51
Ascension	70	10	7	53
Assumption	17	5	1	11
Avoyelles	79	18	8	55
Beauregard	50	4	0	46
Bienville	31	3	1	27
Bossier	138	14	12	112
Caddo	290	120	95	75
Calcasieu	200	80	77	43
Caldwell	21	1	1	19
Cameron	25	0	1	24
Catahoula	27	7	2	18
Claiborne	24	2	1	21
Concordia	44	20	0	24
DeSoto	93	16	7	70
E.Baton Rouge	223	93	76	64
E.Carroll	45	11	3	31
E.Feliciana	50	3	7	40
Evangeline	88	20	2	66
Franklin	58	14	7	37
Grant	19	1	2	16
Iberia	237	67	32	138
Iberville	50	14	1	35
Jackson	31	6	1	24
Jefferson	540	184	259	97
Jeff. Davis	59	9	7	43
Lafayette	395	81	32	282
Lafourche	421	77	49	295
LaSalle	15	1	2	12
Lincoln	120	5	7	108
Livingston	51	11	7	33
Madison	79	21	11	48
Morehouse	104	19	2	83
Natchitoches	164	16	9	139
Orleans	2147	408	111	1628
Ouachita	261	55	26	180
Plaquemines	28	3	22	3
Pointe Coupee	65	3	3	59
Rapides	77	14	36	27
Red River	32	4	1	27
Richland	86	20	5	61
Sabine	38	6	2	30
St. Bernard	58	20	13	25
St. Charles	101	10	8	83
St. Helena	2	0	0	2
St. James	18	5	0	13
St. John	35	20	7	8
St. Landry	265	75	23	167
St. Martin	180	32	22	126
St. Mary	231	67	26	138
St. Tammany	325	40	27	258
Tangipahoa	174	38	27	109
Tensas	22	4	5	13
Terrebonne	196	66	30	100
Union	21	3	3	15
Vermilion	114	27	11	76
Vernon	63	19	7	37
Washington	38	15	1	22
Webster	77	21	5	51
W. Baton Rouge	48	4	0	44
W. Carroll	45	9	4	32
W. Feliciana	50	3	7	40
Winn	21	5	0	16
Out of State	82	0	0	79
Unknown	124	0	0	124

Figure 5.1
Number of Homeless Students Enrolled in Louisiana Public Schools, 1997

Parish	Birth to PK	K to 6	7 to 9	10 to 12	Total	D-T**	Shelters	Total + D-T
Total	877	9129	3367	3124	16497	12338	609	28835
Acadia	*	35	3	1	39	125	10	164
Allen	5	26	2	*	33	34	*	67
Ascension	3	106	3	11	123	210	2	333
Assumption	71	289	4	12	376	173	6	549
Avoyelles	2	30	31	37	100	35	2	135
Beauregard	20	93	11	33	157	80	6	237
Bienville	*	1	2	10	13	7	*	20
Bossier	21	202	149	38	410	529	25	939
Caddo	13	1280	807	1176	3276	1895	45	5171
Calcasieu	14	720	167	120	1021	616	33	1637
Caldwell	12	*	*	*	12	9	*	21
Cameron	*	3	*	1	4	21	3	25
Catahoula	*	3	*	*	3	10	*	13
Claiborne	*	53	2	*	55	23	*	78
Concordia	*	40	20	5	65	50	41	115
DeSoto	8	34	129	294	465	75	1	540
E. Baton Rouge	47	563	653	114	1377	1270	72	2647
E. Carroll	3	9	18	*	30	28	*	58
E. Feliciana	25	30	*	*	55	30	*	85
Evangeline	1	15	2	*	18	98	*	116
Franklin	*	*	*	1	1	30	*	31
Grant	*	49	17	43	109	69	3	178
Iberia	20	136	120	50	326	227	20	553
Iberville	74	275	96	75	520	164	*	684
Jackson	*	3	*	5	8	2	1	10
Jefferson	55	983	108	38	1184	1284	43	2468
Jefferson Davis	1	21	7	7	36	38	*	74
Lafayette	59	538	123	64	784	639	42	1423
Lafourche	3	137	230	7	377	313	9	690
LaSalle	3	93	28	8	132	57	*	189
Lincoln	*	84	44	*	128	91	6	219
Livingston	2	135	59	79	275	201	1	476

Homeless Students Con't

Parish	Birth to PK	K to 6	7 to 9	10 to 12	Total	D-T**	Shelters	Total + D-T
Madison	20	20	1	*	41	40	*	81
Morehouse	*	16	2	12	30	14	4	44
Natchitoches	10	51	*	50	111	44	3	155
Orleans	21	181	76	117	395	403	40	798
Ouachita	13	142	14	14	183	258	15	441
Plaquemines	*	4	1	4	9	5	*	14
Pointe Coupee	12	143	*	*	155	115	1	270
Rapides	54	244	112	32	442	349	67	791
Red River	*	*	*	*	0	*	*	0
Richland	12	33	2	*	47	23	*	70
Sabine	8	18	11	11	48	42	1	90
St. Bernard	30	249	3	4	286	187	6	473
St. Charles	3	97	49	8	157	229	*	386
St. Helena	*	*	*	*	0	*	*	0
St. James	2	11	1	*	14	24	*	38
St. John	5	273	49	177	504	209	17	713
St. Landry	2	182	43	170	397	270	18	667
St. Martin	10	100	5	10	125	90	3	215
St. Mary	7	151	6	11	175	187	4	362
St. Tammany	3	169	15	140	327	197	21	524
Tangipahoa	76	189	23	21	309	309	8	618
Tensas	5	10	2	*	17	9	*	26
Terrebonne	11	168	28	20	227	186	3	413
Union	6	31	7	6	50	37	1	87
Vermilion	25	26	*	*	51	39	5	90
Vernon	47	181	10	14	252	174	9	426
Washington	2	85	31	12	130	89	1	219
Webster	2	4	1	8	15	67	2	82
W. Baton Rouge	*	9	*	*	9	17	*	26
W. Carroll	*	3	*	3	6	15	*	21
W. Feliciana	16	79	6	11	112	7	*	119
Winn	1	168	2	17	188	133	*	321
City of Monroe	12	104	25	13	154	132	7	286
City of Bogalusa	*	2	7	10	19	5	2	24

* not reported

**D-T is Number of Students "Doubled and Tripled-Up"

Figure 6.1
Percent of Free and Reduced Lunch Applications in Public Schools, by Parish, By Race
Fiscal Year 1996

School System	% on reduced meals	% on free meals	% total
Acadia	11.9	59.01	70.91
Allen	13.61	52.93	66.54
Ascension	6.71	44.9	51.61
Assumption	10.19	61.65	71.84
Avoyelles	9.81	70.66	80.47
Beauregard	9.72	45.31	55.03
Bienville	7.52	71.31	78.83
Bossier	6.83	37.47	44.3
Caddo	4.77	62.47	67.24
Calcasieu	8.13	48.84	56.97
Caldwell	10.58	56.91	67.49
Cameron	12.34	33.23	45.57
Catahoula	7.99	63.11	71.10
Claiborne	7.89	69.47	77.36
Concordia	5.76	69.39	75.15
DeSoto	5.54	66.32	71.86
East Baton Rouge	8.54	63.00	71.54
East Carroll	3.01	91.32	94.33
East Feliciana	7.88	77.04	84.92
Evangeline	12.23	66.62	78.85
Franklin	9.43	65.18	74.61
Grant	12.15	52.03	64.18
Iberia	8.36	58.03	66.39
Iberville	6.56	71.48	78.04
Jackson	9.03	50.62	59.65
Jefferson	8.19	70.95	79.14
Jefferson Davis	14.62	52.05	66.67
Lafayette	8.36	52.53	60.89
Lafourche	12.72	48.55	61.27
LaSalle	11.48	44.80	56.28
Lincoln	8.75	55.95	64.70
Livingston	11.39	33.84	45.23
Madison	4.57	82.69	87.26
Morehouse	8.37	74.52	82.89
Natchitoches	8.02	64.3	72.32
Orleans	3.67	89.94	93.61
Ouachita	7.61	44.52	52.13
Plaquemines	8.9	56.08	64.98
Pointe Coupee	7.9	78.56	86.46
Rapides	9.61	55.46	64.07
Red River	9.4	73.33	82.73
Richland	6.87	66.82	73.69
Sabine	9.37	58.97	68.34
St. Bernard	9.27	55.41	64.68
St. Charles	7.54	47.14	54.68
St. Helena	6.19	83.93	90.12
St. James	7.54	71.84	79.38
St. John	5.89	78.17	84.06
St. Landry	10.42	71.31	81.73
St. Martin	11.09	63.26	74.35
St. Mary	9.69	61.84	71.53
St. Tammany	7.02	32.45	39.47
Tangipahoa	7.06	66.29	73.35
Tensas	4.35	87.12	91.47
Terrebonne	11.35	60.9	72.25
Union	8.56	61.95	70.51
Vermilion	10.46	51.99	62.45
Vernon	16.52	44.46	60.98
Washington	7.87	75.49	83.36
Webster	7.39	51.36	58.75
West Baton Rouge	8.91	55.1	64.01
West Carroll	11.69	57.28	68.97
West Feliciana	7.4	48.68	56.08
Winn	7.48	57.7	65.15
Monroe City	3.93	84.11	80.88
Bogalusa City	7.14	73.74	80.88

Figure 6.2
Number of Reported Drownings, By Age Group
in Louisiana, 1996

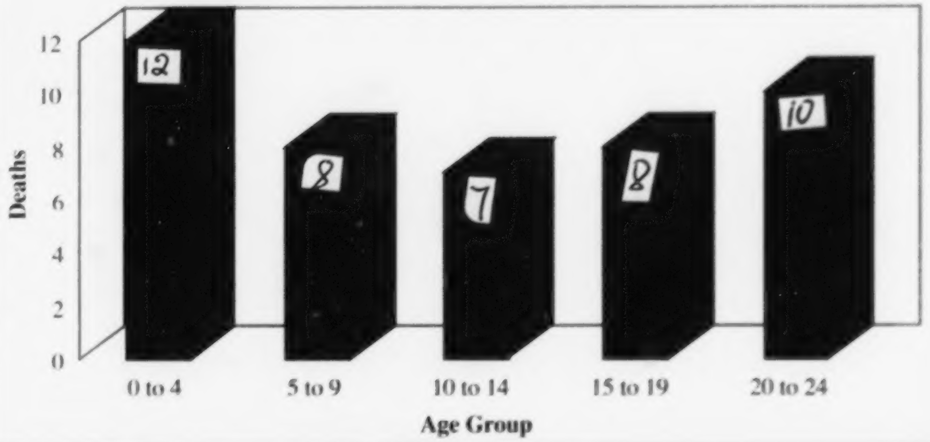


Figure 6.3
Number of Reported Deaths by Falls, By Age Group
in Louisiana, 1996

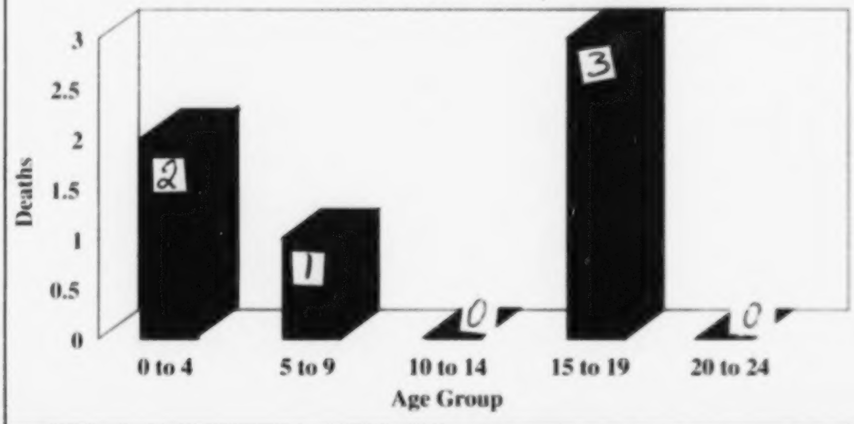


Figure 6.4
Number of Reported Motor Vehicle Deaths,
By Age Group in Louisiana, 1996

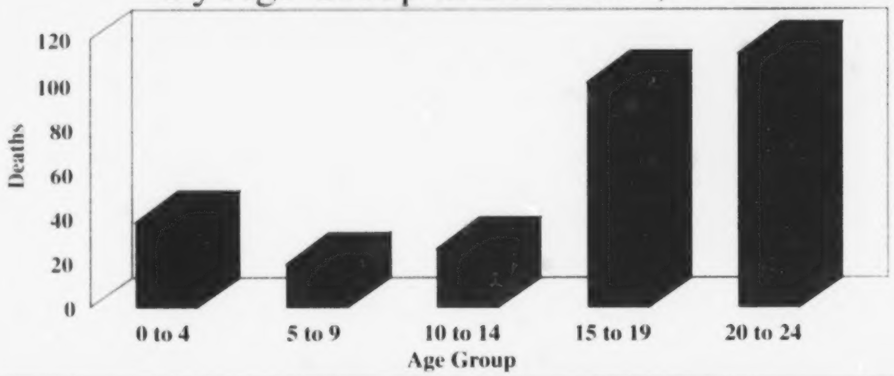


Figure 6.5
Number of Reported Fire and Burn Deaths,
By Age Group in Louisiana, 1996

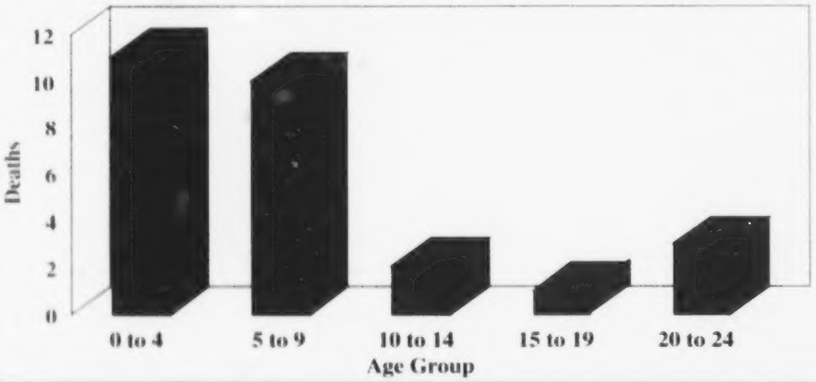


Figure 6.6
Number of Reported Poisoning Deaths,
By Age Group in Louisiana, 1996

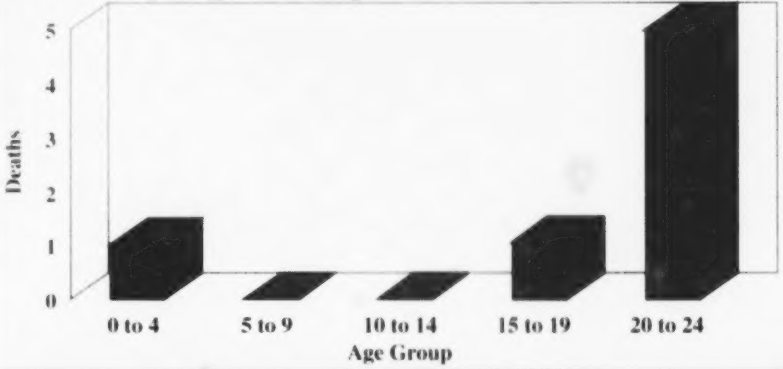
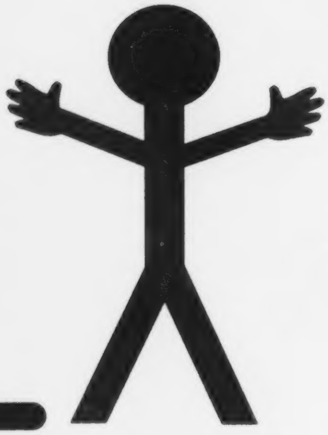


Figure 7.1
Percent of Births Born to Teenage Mothers age <20, By Race for 1996 and Percent of
Births Born to Teenage Mothers age <20 for 1994 & 1995 Total

Parish	**% White 1996**	**% Black 1996**	**% total 1996**	**% total 1995**	**% total 1994**
Total	13.4	27.0	18.9	19.00	19.01
Acadia	18.0	28.2	20.5	21.21	21.69
Allen	17.6	12.9	17.0	22.08	23.85
Ascension	12.2	26.0	16.0	15.70	14.79
Assumption	12.4	27.3	20.1	19.63	22.43
Avoyelles	15.8	26.1	19.0	20.47	21.84
Beauregard	16.2	24.4	17.7	17.47	18.82
Bienville	19.4	22.8	21.0	19.14	18.52
Bossier	11.8	27.0	15.9	15.87	16.54
Caddo	11.2	26.2	19.2	20.16	20.42
Calcasieu	16.1	28.3	19.6	19.36	18.15
Caldwell	22.7	25.0	23.6	21.85	15.65
Cameron	29.3	42.9	30.3	14.91	14.29
Catahoula	22.0	32.8	26.4	24.84	21.77
Claiborne	27.0	19.6	22.2	18.56	24.23
Concordia	19.2	43.3	30.7	33.02	33.84
DeSoto	14.4	27.7	21.7	24.44	21.59
E. Baton Rouge	8.4	25.0	16.4	14.79	15.03
E. Carroll	20.5	32.4	29.3	28.49	31.03
E. Feliciana	15.3	23.3	19.3	16.85	19.73
Evangeline	21.9	30.6	24.9	23.79	19.64
Franklin	18.1	34.4	25.7	25.15	26.67
Grant	22.7	30.0	24.1	22.54	19.92
Iberia	16.1	28.9	21.2	25.02	19.37
Iberville	17.2	25.9	22.0	18.74	16.60
Jackson	15.7	27.8	19.9	22.22	25.00
Jefferson	10.7	25.9	15.2	15.80	15.56
Jeff. Davis	16.8	29.8	19.9	21.76	20.80
Lafayette	11.0	24.0	14.9	14.91	13.90
Lafourche	13.0	34.0	17.4	18.83	15.71
LaSalle	16.3	46.4	20.5	19.16	20.36
Lincoln	7.3	23.6	15.3	18.00	19.69
Livingston	15.3	29.3	16.3	17.56	16.50
Madison	23.1	30.5	28.6	28.63	28.40
Morehouse	20.2	30.7	25.6	31.10	31.78
Natchitoches	14.4	29.1	22.0	24.55	23.80
Orleans	5.9	25.0	21.0	22.35	23.65
Ouachita	13.2	33.0	21.8	20.37	23.10
Plaquemines	19.5	28.2	21.6	17.16	18.96
Pointe Coupee	9.5	31.7	19.7	19.69	20.81
Rapides	16.7	31.6	22.3	21.45	21.05
Red River	18.2	33.8	26.2	18.88	28.40
Richland	17.4	29.9	23.8	30.03	30.65
Sabine	21.9	23.1	22.7	25.09	23.36
St. Bernard	16.7	26.4	17.2	15.47	15.56
St. Charles	8.3	25.5	13.9	13.38	14.56
St. Helena	20.4	32.2	27.0	22.88	20.31
St. James	5.9	21.6	15.4	18.62	17.43
St. John	10.4	27.7	18.8	17.38	16.35
St. Landry	17.5	27.6	22.3	19.75	21.23
St. Martin	16.4	27.1	20.2	18.27	20.52
St. Mary	18.6	31.8	23.5	22.88	22.03
St. Tammany	8.1	28.9	10.8	13.04	12.78
Tangipahoa	17.3	33.7	23.9	22.78	24.15
Tensas	20.7	36.5	30.9	31.78	28.70
Terrebonne	16.6	28.2	20.0	18.56	18.96
Union	17.2	35.1	23.1	22.82	24.54
Vermilion	17.4	23.5	18.3	19.25	18.66
Vernon	16.8	12.8	15.8	16.28	15.50
Washington	20.4	35.2	26.0	30.31	25.32
Webster	16.4	24.9	20.3	23.01	23.44
W. Baton Rouge	14.4	23.6	18.3	16.32	13.65
W. Carroll	21.7	31.4	24.0	20.86	16.30
W. Feliciana	15.1	18.3	16.8	16.30	17.81
Winn	12.1	33.7	20.4	25.45	21.59

Appendix B



Web Pages & Other Useful Resources

Useful Web Pages for State Offices & Agencies

Official Louisiana Web Page
http://www.state.la.us

Governor
http://www.gov.state.la.us

Lt. Governor
http://www.crt.state.la.us/crt/ltgov/ltgov.htm

Secretary of State
http://www.sec.state.la.us

Louisiana State Legislature
http://www.legis.state.la.us/welcome.htm

Division of Administration
http://www.state.la.us/doa/doa.htm

Attorney General
http://www.laag.com/home.cfm

Louisiana Board of Regents
http://webserv.regents.state.la.us

LA Department of Education
http://www.doe.state.la.us

LA Department of Health & Hospitals
http://www.dhh.state.la.us

LA Department of Labor
http://www.ldol.state.la.us

LA Department of Social Services
http://www.dss.state.la.us

LA Department of State Civil Service
http://www.dscs.state.la.us

LA Department Culture, Recreation & Tourism
http://crt.state.la.us

LA Department of Economic Development
http://www.lded.state.la.us

LA Department of Insurance
http://wwwldi.ldi.state.la.us

LA Department of Revenue
http://www.rev.state.la.us

Governor's Office of Women's Services
http://www.ows.state.la.us

Office of Student Financial Assistance
http://www.osfa.state.la.us

International Learning & Technology Center
http://www.iltc.doe.state.la.us

Local Government Web Sites
http://www.state.la.us/local/locindx.htm

Making the Grade National Program Office
http://www.gwu.edu/~mtg

Informational Resources

Advocates for Youth
1025 Vermont Avenue, NW, Suite 200
Washington, DC 20005
(202) 347-5700
E-mail: info@advocatesforyouth.org
Website: www.advocatesforyouth.org

The Alan Guttmacher Institute
120 Wall Street
New York, NY 10005
(212) 248-1111
E-mail: info@agi-usa.org
Website: www.agi-usa.org

American Academy of Pediatrics
141 Northwest Point Boulevard
P.O. Box 927
Elk Grove Village, IL 60009-0927
(800) 433-9016
E-mail: kidsdoc@aap.org
Website: www.aap.org

American Bar Association Center on Children and the Law
740 15th Street, NW
Washington, DC 20005-1009
(202) 662-1730
E-mail: Kgrasso@staff.abanet.org
Website: www.abanet.org/child

American Public Health Association
1015 15th Street, NW, Suite 300
Washington, DC 20005
(202) 789-5600
E-mail: ilisa.halpern@apha.org
Website: www.apha.org

American School Health Association
7263 State Rouse 43
P.O. Box 708,
Kent, OH 44240
(330) 678-1601
E-mail: mrubin@ASHAweb.org

Child Welfare League of America
440 First Street, NW
Washington, DC 20001-2085
(202) 942-0293
E-mail: bmayden@cwla.org

Children's Defense Fund
25 E Street, NW
Washington, DC 20001
(202) 662-3522
E-mail: sdorn@childrensdefense.org
Website: www.childrensdefense.org

March of Dimes
1275 Mamaroneck Avenue
White Plains, NY 10605
(800) 367-6630
E-mail: resourcecenter@modimes.org
Website: www.modimes.org

National Adolescent Health Information Center
1388 Sutter Street, 6th Floor
San Francisco, CA 94109
(415) 502-4856
E-mail: nahic@itsa.ucsf.edu

National Campaign to Prevent Teen Pregnancy
2100 M Street, NW, Suite 300
Washington, DC 20037
(202) 857-8655
E-mail: campaign@teenpregnancy.org
Website: www.teenpregnancy.org

Search Institute
700 South 3rd Street, Suite 210
Minneapolis, MN 55415
(612) 376-8955
E-mail: search@search-institute.org
Website: www.search-institute.org

Definitions

Demographic Data:

There are 64 parishes in Louisiana, only 13 are urban [La. OPH Vital Statistics, 1996: definition is 70% or more of the parish is urban]. The urban parishes are:

- Bossier
- Caddo
- Calcasieu
- East Baton Rouge
- Jefferson
- Lafayette
- Orleans
- Ouachita
- Plaquemines
- St. Bernard
- St. Charles
- St. John
- Terrebonne

Definition of Race:

For the purpose of this data book, the population has been classified as either White, Black, or Other. Other race includes, but is not limited to, Native Americans, Hispanic, Asian and others who do not define themselves as either White or Black. The race classification is assigned by the race reported to the census or on Louisiana birth certificates.

Rate:

A rate is a ratio whose essential characteristic is that time in an element of the denominator and in which there is a distinct relationship between numerator and denominator. Most of the data presented is the rate per 1,000 population with the same characteristics.

Adjusted and Unadjusted Rates:

Adjustment is another term for stratification. Adjusted rates were stratified on age, race or gender.

Age-Specific Rate:

A rate for specified age group. The numerator and denominator refer to the same age group (this is the adjusted rate).

Moving Averages:

Three-year moving averages are used to reduce the effects of year to year fluctuations - the extreme scores are diluted by averaging it with normal scores (flattening out the effects). This provides a better picture of the average over a three-year period of time.

Population age 25-34 in the area in that year x 1,000

Birth Rate:

A summary rate based on the number of live births in a population over a given period of time.

$$\text{Birth rate} = \frac{\text{Number of live births to residents in an area in a calendar year}}{\text{Population in the area in the year}} \times 1{,}000$$